

XII.

SEPTEMBER, 1871.

No. 9.

# CHICAGO Medical Examiner,

N. S. DAVIS, M.D., EDITOR,

AND

F. H. DAVIS, M.D., ASSIST.-EDITOR.

TERMS, \$3.00 PER ANNUM, IN ADVANCE.

## CONTENTS:

### ORIGINAL CONTRIBUTIONS.

- Hæmorrhage as it Was and Is. A Paper  
Read before the Chicago Medical Society,  
July 17, 1871. By Charles W. Earle, M.D. 517
- Case of Protracted and Complicated Disease,  
By L. D. Robinson, M.D., Brookfield, Mo. 546
- Diseased Kidneys in Scarlatina—Experi-  
mental Studies thereon. By Dr. Carl  
Froegler, Aurora, Ill. 551
- Syphilitic Paralysis. By Lyman Ware, M.D.,  
Chicago, Ill. 564
- Treatment of Lupus Exedens. By E. An-  
drews, M.D., Prof. of Surgery in Chicago  
Medical College. 559

### BOOK NOTICES.

- On Some Diseases of the Nervous System in  
Childhood. By Charles West, M.D., etc. 579
- Braithwaite's Retrospect of Practical Medi-  
cine and Surgery 570
- American Journal of Obstetrics and Diseases  
of Women and Children 570

### CORRESPONDENCE.

- Rare Cases. By Alfred A. Castleman, M.D. 560

### PROCEEDINGS OF SOCIETIES.

- Esculapian Society of the Wabash Valley 562

### EDITORIAL.

- Public Medical Library 579
- Cundurango 571
- Circular. Illinois Institution for the Educa-  
tion of Feeble-Minded Children 571
- The Cholera 572
- Cholera at Antwerp 573
- The Medical Register and Directory of the  
United States 573
- One of the Horrors of War 573
- Catalpa Bean in Tetanus 574
- Mortality for the Month of July, 1871 575
- Money Receipts 576
- Belladonna Plaster 576

CHICAGO:

ROBERT FERGUS' SONS, PRINTERS,

12 CLARK AND 242-248 ILLINOIS STREET.

1871.

# CHICAGO MEDICAL COLLEGE.

The regular Annual Lecture Term in this Institution will commence on the first Monday in October, and continue until the second Tuesday in March following. Clinical Lectures *daily* throughout the term.

## FACULTY.

- N. S. DAVIS, M.D., PRESIDENT OF FACULTY,  
Professor of Principles and Practice of Medicine and of Clinical Medicine.
- W. H. BYFORD, M.D., TREASURER OF FACULTY, }  
E. O. F. ROLER, M.D., }  
Professors of Obstetrics and Diseases of Women and Children.
- EDMUND ANDREWS, M.D., SECRETARY OF FACULTY,  
Prof. of Principles and Practice of Surg'y and of Military and Clinical Surg'y.
- H. A. JOHNSON, M.D.,  
Professor of Diseases of Respiratory and Circulatory Organs.
- H. P. MERRIMAN, M.D.,  
Professor of Organic Chemistry and Toxicology.
- RALPH N. ISHAM, M.D.,  
Professor of Surgical Anatomy and Operations of Surgery.
- J. H. HOLLISTER, M.D.,  
Professor of General Pathology and Pathological Anatomy.
- J. S. JEWELL, M.D.,  
Emeritus Professor of Anatomy.
- THOMAS BEVAN, M.D.,  
Professor of Hygiene.
- R. J. PATTERSON, M.D.,  
Professor of Medical Jurisprudence.
- DANIEL T. NELSON, M.D.,  
Professor of Physiology and Histology.
- WM. E. QUINE, M.D.,  
Professor of Materi Medica and Therapeutics.
- F. GRAY BARTLETT, Ph. D.,  
Professor of Inorganic Chemistry.
- H. W. BOYD, M.D.,  
Lecturer on Descriptive Anatomy.
- SAMUEL J. JONES, A.M., M.D.,  
Professor of Ophthalmology and Otology.
- JULIEN S. SHERMAN, M.D.,  
Lecturer on Orthopedic Surg'y and Asst. to Prof. of Prin. & Prac. of Surg'y.
- THOMAS S. BOND, M.D.,  
Demonstrator of Anatomy.

## FEES.

For the Winter Term, admitting to all the Lectures in the College, .....	\$50.00
Graduation Fee, .....	20.00
Matriculation Fee, .....	5.00
Dissecting Ticket, .....	5.00
Hospital Ticket, .....	5.00 to 6.00

The Summer Reading and Clinical Term commences on the first Monday in April, and continues until the first Monday in July: and is free to all matriculated Students of the College. Boarding, \$3.50 to \$4.50 per week. For further information, address

**E. ANDREWS, M.D.,** Sec'y of the Faculty.

e  
h

a.

i.

c.

l.

t.

.

.

.

.

.

.

.

.

.

.

.

.

.

.

.

.

.

.

.

.

.

.





# CHICAGO MEDICAL EXAMINER:

N. S. DAVIS, M.D., EDITOR.

F. H. DAVIS, M.D., ASSISTANT-EDITOR.

---

---

VOL. XII.

SEPTEMBER, 1871.

NO. 9.

---

---

## Original Contributions.

---

### HOMŒOPATHY AS IT WAS AND AS IT IS.

A Paper Read before the Chicago Medical Society, July 17, 1871.

By CHARLES W. EARLE, M.D.

[PUBLISHED BY REQUEST.]

MR. PRESIDENT AND GENTLEMEN:—One year ago my term of hospital service expired, and I commenced the practice of medicine. During this short time I have not failed to notice the difference of opinion among the older, learned, and distinguished practitioners, as to the policy of attacking homœopathy.

I do not claim to have discovered the *correct* policy, and would never urge this as the reason for presenting this article.

I write upon this subject, gentlemen, believing that by so doing I shall myself become better acquainted with the merits or demerits of the so-called system, and with the hope that I may furnish to my younger brethren—colleagues in the regular profession—the correct status, as far as it is possible for me to learn, of homœopathy.

I shall not attempt to amuse, by telling stories of how babies have swallowed large quantities of homœopathic granules—highly attenuated, it may be—of course, *powerful*—and

still live; nor do I wish to abuse, or even speak ill, of any gentleman who may practice homœopathy, either because he can make more money by it, or is conscientious in doing so.

With these views it is certainly proper for me to write on this subject.

It appears to me also, that the medical profession, if they believe homœopathy a humbug, have the same right to speak to the people in regard to it, to warn them against it, to explain the false system to them, as the members of any other profession. The ministers of the gospel do this—they stand in the pulpit and explain to us the fallacies in theology that carry away a certain part of the people—the irreligions, that, as it seems to them, are sapping the morals of the community. But I do not at present believe it a humbug; I will not, unless, indeed, I *prove* it.

Let us now examine this system. What I have to present can best be arranged under the following distinct heads:

- 1st. Homœopathy as practiced by Hahnemann.
- 2d. The attempts made by homœopaths to foist the system into public favor, with the experiments made by different governments.
- 3d. Homœopathy as now practiced.
- 4th. A brief notice of Grauvogl's recent work.

Samuel Hahnemann, a native of Saxony, was born in 1755. When about the age of twenty years he commenced the study of medicine at Leipzig. During his studentship he was certainly not distinguished for his remarkable application or interest in his chosen profession.

Very early he evinced a susceptibility of being led away by transcendental follies, and in less than three years became a follower of Mesmer, or, at least, influenced by his teachings. It appears to us, also, that he lacked *stability* of purpose, that great essential for a successful medical man. That he lacked this essential will be suspected, when the fact is made known to us, that in twenty-eight years he changed his residence no less than twenty-four times; and also, during these years, he taught at one time German and Latin—at another

time devoted himself to chemistry and botany—had charge of an insane asylum—embraced Mesmerism, etc., etc.

He does not seem to have been a person whom we would naturally expect to have been a leader in his profession—much less, one to discover a new system of medicine—able and destined to supercede a system which had steadily advanced side by side with the other kindred sciences for centuries. But in 1810, he commenced to lecture—gave to his own system a classical name, and gratuitously called those practising the regular profession *Allopaths*. The rapidity with which he perfected the system is truly remarkable. He speaks of his great method of cure as “infallible,” “an unerring law,” and as “the great sole therapeutic law.”

In these days, with facilities acknowledged to be far superior to those enjoyed at the commencement of the century, the most ambitious student would be content, at the end of his labors, with one-hundredth part of what Hahnemann claimed at his first lecture. The substance of Hahnemann's theory, and what he claimed for it, is very well understood by you, and I will not here enter into any elaborate elucidation. All existing medical knowledge was claimed to be false. The ordinary practice of medicine was causing the death of many of those who were being treated by it, and when death did not ensue, the persons treated were left in a horrible condition, caused by the poisonous medicine. Diseases were to be cured by remedies capable of producing symptoms resembling those found in the disease under treatment. Medicine is powerful only when reduced to a wonderful degree of minuteness. Nature effects but little in the cure of disease. Only one medical substance should be administered at the same time. The union of several drugs destroys the effect, and sometimes produce a new disease. Many substances, commonly inert, by great shaking and diluting, develop great power.

The last theory of Hahnemann's which I shall enumerate, and perhaps the most startling, is that *seven-eighths* of all diseases are caused by Psora. Startling as it may be to us, Hahnemann declares that nervous debility, hysteria, insanity, mad-

ness, epilepsy, rickets, cancer, yellow jaundice, gastralgia, epistaxis, hæmoptysis, asthma, deafness, and all other kinds of pain are caused by Psora, or, in the language of the non-scientific, that little harmless, and to some, comfortable disease—the itch. And it took Hahnemann twelve years to establish this one fact. After all this labor it does seem cruel that any body can be found who does not believe it.

I have thus given several leading ideas as advanced by Hahnemann, and professedly believed by his followers. Very many, both scientific and non-scientific people, would not care to investigate further a subject with so many pretensions and evident fallacies. They would dismiss it at once as unworthy of close investigation. Suppose a man should submit to the Academy of Sciences in this city, a paper in which he claimed that he had traveled to the moon, had actually conversed with the inhabitants there, and would now enlighten the Academy on the subject. Would they give it a thought? Suppose a person should say to the Faculty of the University at Evanston, I can square a circle—I can demonstrate it. Would they spend their time listening to him? There are certain things which are *absurd*—people let them alone.

But people have believed the system of Hahnemann, and so I continue my investigation. Let us be thorough and examine the details, and, first, how did Hahnemann prepare his medicine?

In order to appreciate the minuteness and delicacy of preparation, I quote from Hahnemann's *Organon*, 2d Am. Ed., p. 200: "If two drops of a mixture of equal parts of alcohol and recent juice of any medicinal plant be diluted with ninety-eight drops of alcohol, in a vial capable of containing 130 drops (for convenience of shaking), and the whole twice shaken together, the medicine becomes excited in energy to the first development of power, or, as it may be denominated, the first potency.

"The process is to be continued through twenty-nine additional vials. \* \* \* \* \*

"These manipulations are to be conducted thus through all the vials, from the first up to the thirtieth, or decillionth development of power which is the one in most general use."

1

The mode of preparation of medicine in the form of powder is quite similar, and needs not a description.

THE DOSE.—Hahnemann recommended the use of small globules of sugar, of the size of mustard seed; one of these globules forms a dose, containing about a three-hundredth-part of a drop of the dilution. Several years after he recommended that the globules should be merely smelled, and observed (see *Organon*, p. 332), that “all that Homœopathy is capable of curing, \* \* will be most safely and certainly cured by this mode of olfaction.” Testimony is not wanting to prove the power of his olfaction. A certain doctor, one of his disciples, says: “My own wife was cured by him, in this manner, of a violent pleurisy in the course of five hours.” Men and women walk the streets of our city to-day who certainly profess to believe that medicine, thus highly diluted, will produce marked results—believe, that by trituration, shaking, and diluting an inorganic substance, there is added a *dynamical* or *spiritual* power. So great was Hahnemann’s fear lest the *power* or *spirit* developed in an inorganic substance would be too powerful, that he directed that but two shakes be given.

In regard to remedies, little need be said in this connection. An entire change of drugs could not be immediately effected, and to remedy this, those in use (in some cases, at least,) were called by different names. Quinine was called China; Calomel, and the mercurial preparations, Mercurias. Many drugs which had been dropped from the pharmacopœia were taken up and paraded before the public as newly-discovered. Articles of food, which we take daily in variable quantities, and which we were not aware created or cured disease, when properly potentized, and used as directed by Hahnemann, became powerful remedies in this new system. Common salt, used homœopathically, is “a powerful and heroic medicament, which can only be administered to patients with the greatest caution.” We inhale the fumes of sulphur to a considerable degree, as when lighting the ordinary match; we are not aware of its creating or curing any disease, yet, carried to a high attenuation, and given by homœopathic hands, it produces, we

are told, marked effects. Bryonia is a drug mentioned quite frequently in homœopathic works, and said to be indicated in many diseases. The name is new to many of us who are young in the profession, but, by referring to our old pharmacopœias, we find it, and it is only dropped because its properties are excelled by many of our more modern drugs.

I might multiply these examples, but must pass to another topic.

The question may occur to some, how was Hahnemann able to make such a discovery? How perfect such a system of medicine? How obtain such a profound knowledge of drugs? etc., etc. I answer, mainly by his *provings*. By this, I mean, their experiments with remedies on themselves and their patients. How were these provings made? Mainly by Hahnemann and his disciples; but, in many instances, by honest and conscientious regular physicians. The result of those made by the latter class I shall notice in another part of my paper; what Hahnemann and his followers ascertained should be noticed in this connection.

Hahnemann says, upon the proving of remedies and the classification of the symptoms which arise, "depends the exactitude of the whole medical art, and the weal of all future generations of mankind." At first, the experiments were made with the crude drug, using the ordinary dose, afterwards by observing the effect with infinitesimal globules and dilutions. Hahnemann advised (see *Organon*, p. 218,) the 30'' dilution as the best for proving the power of a drug, and also claims that while under provings, "all symptoms observed are to be attributed to the medicine." What nonsense! Suppose, for instance, ten persons were selected—good, bad, or indifferent; plethoric or anæmic, sick or well; imaginative or of a cooler temperament—or, make the circumstances the most favorable, take ten persons, honest, healthy, and conscientious, not susceptible to nervous tendencies, *scientific*, if you please—give them the crude drug or the infinitesimal dose, and let them understand that every feeling, desire, or bodily inconvenience is to be attributed to the drug; what will you have? Look at this display of symptoms taken

from their own works. "After stooping some time, sense of painful weight about the head upon resuming the erect posture." "An itching, tickling sensation at the outer edge of the palm of the left hand which obliges the person to scratch." In the provings of *hydrastis canadensis* we are told (the dose being given at 8.45 a.m.), that at 11 a.m., sneezing in the sun caused flickering in the eyes."

Dr. Hempel calls particular attention to the "provings" made with sulphur. A student having taken for three weeks, three times a-day, five globules moistened with the tincture of sulphur, began to have a very troublesome feeling of fatigue. In the course of a few days the pain was felt deeper, as if in the young man's bones; a short time afterwards the head of the right tibia became very painful, and after the slightest exercise he had to go and lie down." All these terrible pains were caused, it will be remembered, by taking five globules, moistened with tincture of sulphur, three times a-day. The learned Dr. also favors us with some other symptoms caused by taking sulphur: "shooting pains in the eyes," "boring pains in the ear," "raw pain in the mouth," "digging pain in the teeth," "drawing pain in the upper teeth," "sensation as if he were smelling soap suds." He closes his lecture on sulphur with this grandiloquent burst of rhetoric: "If you would conquer the great mind of the profession, then let me urge you to ever think of homœopathy with hearts full of reverence for the consistency and universality of her teachings as a doctrine of life; a heavenly truth, which will not fail, if properly understood and universally applied, to link earth and heaven in one great cycle of sensual refinement, intellectual beauty, and social and religious harmony."

Some of the symptoms produced by common salt are, "rigidity of joints when they are moved," "paralysis," "frightful dreams of quarrels, murders, fires, thieves," etc., "awkwardness," "redness of the great toe"—many others are given. Symptoms produced by chalk: "great tendency to strain the back in lifting," "on walking in the air, sadness with tears," "flaws in the fingers," "disposition to weep, even about trifles," "disgust and aversion to all labour whatever," etc. These are but a few mentioned in Jahr's *Manual of Homœopathic Medicine*.



I have thus, gentlemen, given you an account of some of the leading doctrines of homœopathy as taught by Hahnemann. No attempt has been made to represent them unfairly, and my assertions are mainly from homœopathic authorities.

One doctrine remains to be examined—the law of cure—“*Similia Similibus Curantur*.” When I shall have examined homœopathy, as *now practiced*, you will agree with me in the statement I now make. The law of cure, divested of everything else, either devised by Hahnemann or dragged into the system by some of his followers, is the only disputed point between physicians and homœopaths. I therefore leave this point till near the close of my article.

II. I now come to the second part of my paper—attempts to gain for homœopathy governmental patronage, with experiments by both governments and individuals.

Hahnemann published his first paper in 1796; nine years later his first work; five years after this his *Organon*, and in 1828 his *Treatise on Chronic Diseases*. Hahnemann's ideas were somewhat, yet not entirely, original, and governments and individuals were not slow in testing the merits of his system. Governments are always willing and anxious to improve the hygienic condition within their boundaries, and our leading and best physicians are not biased in their opinions, but willing to avail themselves of everything to combat disease, and alleviate human suffering. The assertion is a false one, that physicians do not investigate new theories of disease. The true physician is investigating constantly, and he incurs the displeasure of such as Hahnemann and his followers because he will not permit himself to be influenced by money, enthusiasts, and pretenders. The Christian clergymen incur the displeasure of such as Joe Smith and Brigham Young for the same reasons. But what Government or individual, it may be asked, ever gave homœopathy a fair trial and found it wanting? Let us look over the list.

“In 1829, by order of the King of Naples,\* a commission was appointed to test homœopathic remedies, under the following restrictions:

\* See *Chicago Medical Journal* and *American Medical Times*.



"1st. The Commission\* shall consist of two Professors of the University of the Faculty of Medicine; two members of the Medico-Chirurgical Academy; two members of Public Instruction, and the Heads of the Hospital.

"2d. The Commission, after having proved the attenuations of the homœopathic remedies, shall place the said remedies in a strong box, firmly closed, with two different locks, the keys of which shall be returned, one to the Director of the Clinique, and the other to the Commissioners charged with following the treatment.

"3d. The clinical ward shall have but a single door, guarded by a sentinel; its internal arrangements shall be adapted to health; it shall not contain more than fifteen to twenty beds, and two visiting physicians, one chosen by the attending physician, the other by the Commissioners, who shall keep an exact register of all that happens to the patients, the changes in their disease, their regimen, cures, deaths, if any die.

"4th. The admission of patients affected with acute or chronic diseases, shall be left to the choice of the attending physician and commissioners, with this condition, that the attending physician shall not be obliged to take patients, known to be incurable, nor shall diseases equivocal be considered proper for positive experiments.

"5th. The Commissioners having selected the class of diseases, the attending physician shall make known the symptoms, administer the remedies, and prescribe the regimen.

"6th. Each day the condition of each patient shall be determined by the attending physician and commission.

"The result of this trial of forty days of homœopathic treatment, under the observation of the commission named by the King of Naples, was the conclusion, that not only is this treatment of no effect, but that in certain diseases it has the inconvenience of preventing the employment of remedies capable of effecting a cure. The physician in attendance was M. de Horatus, author of a homœopathic work, and who had boasted of the most marvelous cures.

"Clot Bey; Physician-in-chief to the armies of the Viceroy of

Egypt, states (*Annal de la Med.-Physiolog*, Sept. 1834, Ency. Decr. 1834,) that a German homœopathic physician petitioned the Council of Health to try this system in the Hospital of Cairo, alleging its cheapness, etc. He was allowed to select patients suffering from ophthalmia and dysentery. The Council were convinced from this experiment that the homœopathic system was not entitled to their confidence. The following is the conclusion of the report of the Council of Health: "That the cures obtained were due simply to the hygienic and dietetic treatment adopted, and not at all to the infinitesimal doses." So unsuccessful did the trial prove, that the homœopathic practitioner was obliged to abandon the country.

"In April, 1832, a ward of thirty beds, in the Hotel Dieu de Lyon, was placed in charge of M. Guerard, the most distinguished homœopathic physician of that city, with liberty to select his patients. He selected fifteen, suffering from febrile affections—pneumonia, erysipelas, catarrh, etc. He visited them daily, and in presence of sixty students and several physicians, examined, prescribed homœopathic remedies, and directed the regimen. The experiment continued for seventeen days, when the physician voluntarily retired. During this time there was no improvement in the patients, nor any advantage gained which could be ascribed to the homœopathic treatment. The physician attributed his failure to the action of deleterious miasma, always existing in hospitals, and from which he could not protect his patients. He acknowledged that the remedies which produced such powerful effects in private practice, utterly failed in hospitals, owing to the emanations from the bodies of persons collected together, which neutralized the infinitesimal doses.—*Gaz. Med. de Paris*, Ency. Nov. 1833.

"In 1834, M. Andral employed homœopathic remedies in one hundred and forty cases, in the Hopital de la Pitti, of Paris. The arrangements of the ward, the regimen of the patients, and all the details of treatment, were carefully managed according to the direction of Hahnemann. The remedies were all obtained from the most eminent homœopathic apothecary in Paris, and administered with the most religious exactness. The result

of this trial proved the entire insufficiency of the remedies employed. It was found necessary, in most of the cases, to resort finally to the regular treatment.—*Bull. Gen. de Therapeut.* 1834.

"In 1835 the Homœopathic Society of Paris petitioned the authorities to establish a Homœopathic Hospital and Dispensary. The Minister referred the matter to the Academy of Medicine, which appointed a commission to draw up a report. This commission reported in substance as follows: That they had submitted the system of homœopathy to the most rigid tests and practice, without obtaining any other than negative results, so far as the action of remedies was concerned; while observation proved that grave dangers were liable to follow its adoption in some diseases, from the neglect of proper and reliable remedies. If the authorities yielded to this request, the advocates of Mesmerism, animal magnetism, etc., were equally entitled to have hospitals opened for the trial of their peculiar systems, and thus every form of quackery would demand attention. They advised that the petition be not granted. The Minister of Public Instruction, acting upon the advice of this report, refused the petition.

"In 1829, the Czar of Russia ordered that the system of homœopathy should be tried in several military hospitals. For several years the practice continued, and reports of marvelous success were annually published, but it has entirely failed of obtaining the confidence of the Government, and by a recent edict it is forbidden to practice homœopathy on the Russian territory."\*

\* Some months since the *Examiner* published a communication asking information in regard to the practice of Homœopathy in Russia. On inquiry of Col. Croswell, a gentleman of great culture and acute observation, who was appointed United States' Consul to St. Petersburg by President Buchanan, and resided in Russia some 15 years, I learn, that Physicians from other countries who take up their residence in that empire, and desire to practice Homœopathy or Allopathy, are required to pass an examination before the Imperial (Allopathic) Board of Medicine; that a diploma from a Medical College, well-known and in good repute, has considerable weight as evidence of qualification, and makes the examination less formal; that a Physician is not allowed to practice medicine without obtaining a certificate or license from the Imperial Board. The certificate is issued with the understanding, of course, that the regular sys-

In 1857, a resolution was introduced before the Board of Governors of the Almshouse Depot, New York, providing that one-half of Bellevue Hospital should be set apart for the practice of homœopathy. A committee was appointed to investigate the claims of the system, and in their report many of the facts and experiments brought out in Europe were communicated. I am indebted to the report of that committee, of which Washington Smith was chairman, for much of the preceding. It is not necessary for me to state to you, gentlemen, under whose management Bellevue Hospital has continued to advance and improve. It has been under the charge of gentlemen whose works we delight to peruse, whose names are bright on the page of our medical literature; men of professional standing—men *educated, enlightened, liberal, but always* of one school.

In 1862, the United States Senate took up the question, and Senator Grimes, of Iowa, introduced a bill placing some of the hospitals in and around Washington under the charge of homœopathists. For aught I know, the eastern army may have been delayed while this momentous question was being considered. It was found, however, upon investigation, that other governments than ours had been petitioned—those petitions granted—the system tested, and in every instance failed. Our Government thought too much of her citizen soldiery to turn them over to a system so utterly devoid of anything to recommend it. Men, professedly homœopathists, *did* obtain commissions as surgeons in our army, not to practice *homœopathic* surgery, or by passing a homœopathic examination, but by that miserable system of subterfuge and evasion, which, I am forced to say, they practice every day of their lives.

But what have individuals done to test this system? Have honest and competent men not pledged to this particular school ever tested its merits? The remark made in regard to governments always being ready to examine any new theory based on tem of medicine is to be practiced. It is highly probable, however, that after obtaining their license they practice what they please. Perhaps I should say, that Col. Croswell has been treated homœopathically, and is not at all pledged to our system.

science with the desire to improve her hygienic condition, I may now repeat, and apply it to individuals. As a profession, we desire everything that will benefit our patients. We are not given to any one idea, or-school, or ism. We are not such consummate fools as to let a patient die, if anything under God's heaven, wherever found, would save that patient. And yet, if one takes homœopathic authority, he would conclude that we plan to let those committed to our care perish.

Some of our most distinguished physicians have tried homœopathy; let me quote from some of them. M. Andral says, "I have submitted this doctrine to experiment; I can reckon at this time from one hundred and thirty to one hundred and forty cases, recorded with perfect fairness, in a great hospital, under the eye of numerous witnesses; to avoid every objection, I obtained my remedies of M. Guibourt, who keeps a homœopathic pharmacy, and whose strict exactness is well known; the regimen has been scrupulously observed, and I obtained from the sisters attached to the hospital a special regimen, such as Hahnemann orders. I was told, however, some months since, that I had not been faithful to all the rules of the doctrine. I therefore took the trouble to begin again. I have studied the practice of the Parisian homœopathists, as I have studied their books, and I became convinced that they treated their patients as I had treated mine, and I affirm that I have been as rigorously exact in the treatment as any other person."

This same distinguished physician, assisted by several others in good health, also experimented upon themselves with their most highly extolled remedies. The experiments continued for one year, and were with such drugs as cinchona, aconite, sulphur, and arnica. At the end of the year, he publicly stated to the Academy of Medicine, that not a single symptom attributed to arise from the use of the drug was experienced by either himself or associates.

"During the Peninsular War, M. Bonnet, President of the Royal Society of Medicine, of Bordeaux, used cinchona as a preventive against various diseases, but never noticed the pretended symptoms." It has been claimed that belladonna, given

in infinitesimal doses, would prevent scarlatina or cure the disease *instantly*, where the remedy had not been given as a prophylactic.

Many good mothers in our land are undoubtedly waiting, with the omnipotent-globule in hand, the first appearance of this dreaded disease, never doubting its power to cure.

In 1849, two homœopathic physicians in Cincinnati, claimed to have treated 1116 cases of genuine cholera with a surprising small loss; but the superiority of homœopathic treatment of cholera may now be confidently denied. Even the boldest defenders of the system now admit its insufficiency when the disease is severe.

Dr. Russell, one of the editors of the *British Journal of Homœopathy*, says—"We cannot help deprecating the boastful tone we so often hear assumed by homœopathists on this subject—the treatment of cholera." Dr. Fluschman, of Vienna, with a large experience in homœopathic treatment of cholera, says—"Every remedy which has been recommended has been tried and tried again by us, but I have little to say in praise of any of them."

I have now passed in review Parts I and II of my essay. I have examined the leading ideas of homœopathy excepting the law of similia. The trials given homœopathy by different governments have also been given. We have seen that Hahnemann was not a man whom we would naturally expect to be the author of any thing original or remarkable. He conceived a theory and at once declared it—"Infallible." We have spoken of the dose, the manner it is prepared, etc.; we have noticed also the itch doctrine. This system of medicine was given to the world about 75 years ago. How has it stood the test? What does Hahnemannian literature say on the subject?

Examining it fairly, without prejudice or passion, let us see if the practice of the gentlemen of our city, known as homœopathists, agrees with the rules given by Hahnemann. With an earnest desire to speak the truth, let me answer the question. At first I am compelled to say, and our homœopathic brethren confess it, as will be seen by a quotation which I shall read presently, that they have hardly a work written by a homœo-



pathist to which I can refer. There is a perfect dearth of homœopathic authority on every thing except therapeutics.

From the very beginning there has been a gradual letting down from the doctrine of Hahnemann. First they tell us there is nothing in the dose. They use enough medicine to cure the disease, but on the *homœopathic principle*. If they do away with the dose they must of course do away with their fine figured way of preparing it. One by one they throw overboard the pet idea of their patron saint Hahnemann. They say that homœopathy is advancing, Hahnemann's ideas are very old. Dr. Richard Hughes has written a work, purporting to be to a friend (a convert), who is anxious to know something of homœopathy. He devotes 22 pages to mercurius—calls it calomel, lauds it to the skies, and says we give it in certain affections in about the same dose you do, stopping soon enough to avoid salivation. Who don't?

Dr. Holcombe, of cholera fame, has published a little pamphlet, in which he assumes to tell us just what homœopathy is. He advises the use of about everything the regular physician places any confidence in, even the much-abused and neglected lancet, and yet you will all remember that it is on the *homœopathic principle*!

In this city we have about 75 medical men professedly homœopathists. A prominent and influential member of the school informs me that only eight or ten at most of that number are pure undeviating homœopaths. One of our druggists gives it as his opinion that they have only five or six who are true to their profession. These gentlemen, if I understand it correctly, believe every word of Hahnemann's writings, and try to follow his teachings. What shall I say of the rest? Several of them are professors in the Hahnemann school in this city. The word homœopathist is displayed on many of their signs. By every way possible they certainly pretend to be homœopathists. We see them on the street with the customary little pocket cases. Now, how about their practice? It is altogether at variance with what they profess. One of their professors in this city, recently gave for a periodical neuralgia, quinia sulph. grs. xxiv,

divided into six powders, one powder every four hours. The patient was cured in 24 hours. This was after about ten days treatment with sugar-coated granules. Another homœopathic gentleman, an author, at least he has written one small work, buys calomel and quinine by the ounce. Some of his prescriptions also are known to some of us; they are simply *immense*. A medical friend of mine vouches for the truth of the statement, that he knows of grs. ij. of quinine being given every two hours by a homœopath to a child ten years old. The same friend was called to visit a child in convulsions, who was under the treatment of a homœopathic gentleman. The family, having always had regular treatment, had only recently employed a homœopathist. They were disappointed in homœopathy and spoke of changing again. The homœopathic physician said to the family—"You need not change physicians; your child is taking allopathic drugs in allopathic doses!" At this very time almost every available place in our city is covered with an advertisement of somebody's "Home Bitters." The dose of the compound, as given on the bottles, contains about 6 grs. of gentian, 3 of wild cherry bark, 9 of orange peel, 3 of camomile, 3 of Peruvian bark, 3 of cardamon seeds, and 6 of columbo. It is endorsed and recommended by five homœopathic professors. The *Investigator* confirms this with lamentations.

Some of the homœopathic physicians in this city, in the treatment of a patient, are accustomed to give large doses, such as 20 grs. bromide potassium, associated with, perhaps, a millionth of a grain of lycopodium. If the patient recovers, it was the lycopodium that influenced the disease. A well known homœopathic physician, with an office in quite a central locality, always appears on the street with two homœopathic medicine cases under his arm. An acquaintance, a clerk at the drug store near the gentleman's office, upon going to a neighboring city to locate, gave me a specimen of homœopathic prescription writing. This physician has his private formulæ for ointments and mixtures, and in addition, gives in the ordinary way, iod. potass., mercury, opium, morphia, quinine, in fact, every remedy, which is considered standard by the so-called



allopath, in good round doses. But it is a needless expenditure of time to multiply such testimony, inasmuch as it only establishes what homœopathists themselves are frank to confess.

A few *propositions*, advanced by our homœopathic friends, deserve to be noticed. They tell us that homœopathy is an advance from allopathy. Said a well-known homœopathic physician to me some months ago, speaking of his long continuance in the profession and his advanced age, "I jumped ahead of you fellows 25 years ago; I am a homœopathist." A few words in regard to the claims that homœopathy is any advancement in medicine and I pass to a second assertion. The living body is made up of organs. All are endorsed with certain and appropriate natural powers. These powers are so adjusted that they have a tendency to preserve the whole organism in a perfect state. When, from any cause, internal or external, any irregularity occurs, if slight, this regulating principle is sufficient to control the action of that evil cause, and restore the system to its natural condition. If the cause of the disease is profound, too severe for this regulating principle to regulate, then the physician with his remedies steps in to assist this principle. This I understand is the true system of medicine. The science of medicine has advanced during all past time hand-in-hand with the kindred sciences. The advance has been slow, but the improvement sure. Articles in our materia medica worthless have been thrown out. There has been a general weeding out. Physicians write less intricate prescriptions; they have learned to trust nature more. And the only principle which I know anything about, homœopathy, eclectics, hydropathy, *et al.*, to the contrary notwithstanding, is that a sick person is to have just what experience has taught will cure him.

Homœopathy came, and with one mighty bound went back 500 years. Its advocates invaded the *loathsome* for remedies with which to humbug the people. Take Jahr's Pharmacopœia and look at their remedies. On page 96 you will find an account of the American pole-cat or skunk. The learned author of the advance school says, "near the *anus* there is a

pouch where the follicular glands secrete an odorous matter; the animal squirts his liquor, etc. We make the three first attenuations by trituration." The black spider (see page 83) is prepared for homœopathic medication by putting the whole animal in alcohol; "macerating it for weeks, and even months, and then decanting the clear liquor, which is the mother tincture." "The three first attenuations of the common wood-louse" are prepared by trituration; the tincture, by 20 parts of alcohol. "Lachesis (snake poison) is procured from the poison bags which are found in the upper jaw of these reptiles."

Prof. O. W. Holmes writes that, "it is said the *pediculus capitis* (the common head-louse) is actually prescribed in infusion—hunted down in his capillary forest, and transferred to the digestive organs of those he once fed upon."

What may we expect next? The Album Græcum has been omitted. That was formerly used in medicine. Why not prepare the first three attenuations by trituration? And this is advancement!

Again, they say it is *popular*—it is supported by enlightened and fashionable people.

I know at least one homœopath—who, by the way, is quite true to Hahnemann—who has it as a standing argument, that the high-bred, the elegant, the first-class people patronize him. His practice is all good pay. He never has any low Dutch and Irish apply to him for medical advice.

I admit that poets sing its beauties, that dyspeptic clergymen exalt its merits in their papers, and that it is a favorite with babies. There is also a class of delicate, nice, fastidious, squeamish people, who eulogize this system. They panegyryze, cry up, and bless everybody homœopathically inclined. It is so pleasant to have the doctor around twice a day, the medicine is cheap, and then it is *sugar-coated*. And those homœopathic balls—they have had two in New York and one in Chicago—are such high-toned affairs, nothing low or vulgar, none of the poor there, and they do *so much* good. This argument is certainly weak, yet some homœopathic physicians, and many of their patients, use it.

Granting for a moment that it is true—that all the fashionable employ homœopathists. What part of our population live in marble-fronts? How large a part on our avenues? What class of people have acute disease—diseases which need treatment—and what class, aches and pains, which only a homœopathist can enumerate? The poor, the over-worked, those living in unhealthy localities, families not surrounded with those things which make life happy and promote healthfulness in the community; those exposed to every change of weather; the middle-class, constituting the great majority—are the persons who are acutely sick; among these various classes thus enumerated the true physician finds his work.

The pretensions of homœopathy have never succeeded among these people. It sounds badly, however, even if true, for homœopathists to boast and swagger over patients elegant and refined, yet simply dyspeptics and hypochondriacs.

Our homœopathic friends have a few standard statements, which they are accustomed to throw out to the people at every opportunity. They never let a chance go by without suggesting some of their favorite considerations to those who will listen:—

1st. The distinguished physicians who have embraced homœopathy.

2d. The decreasing death-rate in hospitals as soon as homœopathic treatment is instituted.

3d. Their wonderful cures.

When we come to examine these statements we are surprised at the bare-faced misrepresentations. Hahnemann was accustomed to make a most formidable display of distinguished authorities. Several gentlemen have taken the time, and have tried to look up those authorities—some of his quotations cannot be found—many others, Prof. Jøerg. of Leipsic, has proved to be adulterate and false; and, of the few found by Prof. Oliver W. Holmes, two were wrongly quoted and one a gross misrepresentation.

Among the many names, displayed in an imposing manner, of those who had openly confessed the power of homœopathy,

and acknowledged its supremacy over the ordinary method of practice, may be found M. Breschet, of Paris. Prof. O. W. Holmes has a literal translation of a letter from this gentleman, which I will read:—

\**Dear Sir and Respected Professional Brother:*—You have had the kindness to inform me in your letter, that a new American journal, the *New World*, has made use of my name in support of the pretended homœopathic doctrines, and that I am represented as one of the warmest partisans of homœopathy in France. I am vastly surprised at the reputation manufactured for me upon the new continent, but I am obliged, in deference to truth, to reject it with my whole energy. I spurn far from me everything which relates to that charlatanism called homœopathy; for these pretended doctrines cannot endure the scrutiny of wise and enlightened persons, who are guided by honorable sentiments in the practice of the noblest of arts.

I am, etc., etc.,

G. BRESCHET,

*Prof. in the Faculty of Medicine; Member of the Institute;  
Surg. of Hotel Dieu., and Consulting Surg. to the King.  
PARIS, 3d November. 1841.*

In regard to hospitals, Hahnemann established one at Leipzig, and yearly issued a report, giving remarkable cures, and proving, by tabulated statements, the superiority of homœopathic treatment. The hospital ceased the year following Hahnemann's death. At least two homœopathic hospitals, one in London and one in Vienna, have been discontinued within the past few years. They complain that the control of hospitals is not given into their hands. When they are established they are not able to sustain them. Tabulated statements, pretensions, and braggadocio will not maintain a hospital. Sooner or later the truth will come to the light.

The ostentatious ways in which they speak of their cures is truly amusing. I can barely notice their fallacies in this respect.

I believe it is universally conceded by all members of the regular profession, that the efforts of nature will, in many

instances, sooner or later, cure a great part of the milder diseases we are called to treat. Perhaps in 90 cases out of every 100 in daily practice, our patients would, in time, recover through the restorative efforts of nature. The physician assists these efforts of nature, whose tendency is to cure the patient, and therefore, as a matter of mere economy, he is useful in most of the milder diseases. That man who would be sick ten days if left entirely to himself, might, in many cases, be restored to his business at the end of the second by obtaining the advice of a physician who recognizes the power of nature, and is willing to use a remedy which experience has proven will assist the power already at work.

Not so with the homœopathic physician. He cares nothing for physiology or pathology. He recognizes no power of nature. "*Similia Similibus Curantur*." A little more of the same poison. And if 90 out of 100 get well, under homœopathic treatment, the little globule *always* does it.

Rummel, a distinguished writer in the homœopathic school, cures a case of jaundice in *thirty-four* days—pulsatilla, aconite, and cinchona are the weapons.

A man in Saxony sprains his ankle, and is so unfortunate as to call an allopathist. He is treated in the common vulgar way for two weeks, and not cured. He calls a homœopathic physician, and, strange as it may appear—*mirabile dictu*—in a little over a month is cured by arnica used homœopathically. This extraordinary case is then published.

Another case is recorded of a patient with a cold in the head. She is taken through that illness, restored to her weeping friends, in six days.

The President of the Society informs me, that a few years ago, the fact was blazoned before the public, that a fractured bone united, actually *healed*, in three days under homœopathic treatment.

It is now going the rounds among our homœopathic brethren in this city, that pulsatilla given in an infinitesimal dose will correct the malpresentation at the superior strait. But reports are nothing, let us proceed on a scientific basis, and take one

of their journals for authority. (See *Medical Investigator* for 1869, page 123).

Dr. Beebe, of this city, is speaking in the State Homœopathic Society. "He believed physicians should draw a wide contrast between homœopathic and allopathic surgery. There is a vast difference in the result. The mortality is very much less, and we can undertake operations with hopes of success that they dare not undertake. So sure is he of success, with his remedies to aid him, that he feels able to undertake almost any operation. Believed that before another twelvemonth he would extirpate a lung. Has a case now, were it the right lung that was diseased, instead of the left, he would excise it."

The axiom, *Similia Similibus Curantur*, I shall notice very briefly. This, it appears to me, after a very patient review of the way homœopathy is actually practised in Chicago, is the only disputed question. If there is to be any discussion between the two schools, it can be on this question, and this only. The infinitesimal dose has long since been given up. The high attenuationists sometimes attempt to argue, from a Hahnemannian standpoint, or perhaps, at this time, they would quote Grauvogl, who clearly is now their champion. But the high potency men are so few and far between (about two per cent. of practicing homœopathists) that the mass of homœopathists controvert their argument at once. \* It is difficult to argue a question which they openly deny in practice. The mass of practicing homœopathists give as large doses and the same remedies as the regular school, and they dare not deny the fact. The assertion that it is all done on the homœopathic principle is too wide a departure from the truth for any body to believe. You must then count out 98 per cent. of practicing homœopathists—set them apart, and label them *mongrels*. The remaining two per cent. must prove—

1st. That small doses of a drug will ALWAYS cure a disease, which, when given in larger doses, will produce the symptoms of that disease.

2d. That a drug which will not produce similar symptoms will NEVER cure a disease.



3d. That a molecule of an organic or inorganic substance, by trituration and shaking, becomes equal to a molecule of *living germinal matter*.

4th. That a molecule of this living germinal matter, homœopathically prepared, and enveloped in a covering of sugar, introduced into the mouth and down the œsophagus, will go directly to the diseased germinal point, and by *dynamics*, or *spirit power*, heal it.

5th. It will be incumbent on them to explain why so many who profess homœopathy get so far away from what they believe.

If they have such powerful remedies which will produce the desired result on the principle of *similia*, why in the world don't they use them? Why use our *crude poisonous* drugs when they have such elegant sugar-coated preparations, at once *so powerful*, and yet never known to injure any body? Let us hear from some of them on these points.

I come now to the last division of my subject. I must not omit to speak to you of a new text-book on homœopathy—Grauvogl's new book.

In the *Homœopathic U. S. Medical and Surgical Journal*, for January, 1867, will be found a most urgent and no less humiliating demand for the production by homœopathists, of standard medical works. It shows as well as anything I could write the kind of men who have embraced homœopathy. It is the confession of homœopathists themselves, contained in their own language, as follows:

"A leaden apathy has for a long time past been upon our homœopathic physicians East. We want solid acquirements everywhere; we want in our schools more pathologists and learned physicians—as Bennett, Watson, and a score of others. Writers, for instance, upon female diseases, and their surgical and mechanical treatment; and writers on obstetrics, such as Bennett, of London, Sims, Simpson, and Barnes. When will issue from our ranks, writers of such worth as Rayer, Casenave, or Wilson on diseases of the skin? Louis Andral, and Skoda, on diseases of the chest—West on diseases of children—Ricord

on syphilis; or such pathologists as Rokitsansky, Virchow, or Rock? Homœopathy is here a *humiliated beggar* to allopathy. Produce—produce! Were it but the pitifulest infinitesimal fraction of a product, produce it, in God's name!"

This is truly a homœopathic wail—a modern and infinitesimal cry for learned and educated men to write homœopathic books. "When will issue from our ranks," he cries in perfect despair. While the above pathetic appeal was being written, a gentleman in this city, noted for his charities, and, from all I can learn, a conscientious truthful homœopathist of the pure unadulterated Hahnemannic school, was translating a work from the German. The book was issued from the publishing house of the Western News Co., in the fall of 1870. Judging from what the homœopathists say of it, one must conclude at once that Grauvogl is the most candid, the most thoughtful, the boldest, the most enthusiastic, and the *only* writer of the age, and his book destined to supply at once the great want of standard works which has heretofore existed in every department of their entire science. The book is before us, containing nearly 800 pages of reading matter, well bound, with a picture of the author. The *Chicago Times* speaks of it carefully—praises its typographical excellence, and says the homœopathists are an indomitable lot of fellows. The *Tribune* praises its typography, and predicts that it will soon find a place in every homœopathist's library. The *Brooklyn Daily Union* says, "The work of Dr. Grauvogl has a double significance, as a new contribution to medical science as a whole, and as an exposition of a system which it develops and illustrates with fresh facts and carefully attested analogies." The *Medical Investigator*, Chicago, says, "Grauvogl has created a sensation." Dr. Eggert, of Indianapolis, says, "The work will—nay it must—become the bulwark of our school in the face of our enemies." Dr. Pearson, Mt. Pleasant, Iowa, says, "Grauvogl has opened a masked battery, and it will be difficult to come within range of his guns without being forced to surrender." Dr. Gatchell, speaking of the old school, says, "They will be impressed with the singular ability with which Grauvogl



handles their leaders and smashes their idols." Dr. Samuel A. Jones, of New Jersey, speaking of the book, likens it to a sword—"A scimitar, *cleaving its way*, etc." When Dr. Her-  
ing read the book, he exclaimed with delight, "At last we have a thinker!"

Now, gentlemen, you are expecting something formidable. Evidently Grauvogl thinks he has sounded the death-knell of physiological medicine. It is not my province to review this work, but, in order to bring down the history of homœopathy to the present time, I must notice its prominent features.

Text-book of Homœopathy, by Dr. v. Grauvogl, of Bavaria. Translated from the German, by Dr. Shipman, of this City. Published by Halsey and the Great Western News Co.; Contains about 800 pages, printed and bound in an elegant manner; the Table of Contents is very copious, and the work is divided into parts I and II. Part I discusses Theories and Principles, Part II the Practice of Homœopathy.

In his introduction, Grauvogl attempts to account for what he terms "the lamentable misconception and persecution of homœopathy." The physiological school, which he very kindly calls us, believe everything *impossible*, which to them is *incomprehensible*. A furious war was waged against the theory of gravitation on account of its incomprehensibility. It has been so at the commencement of all the sciences—homœopathy is not an exception; in its commencement it must expect to be persecuted; and people are acting in the same manner towards homœopathists as they did towards Newton, Galileo, Copernicus. None of the unlearned, and but few of the learned, can comprehend homœopathy. And our homœopathic friends lay themselves down in their little beds and comfort themselves with the idea that they are martyrs to science.

Our author gives his definition of life, health, and disease. It is nothing new for him to advance a definition of life; several have done it before him, and really he does not seem to have given a more correct definition than others before him.

Two men have been selected by Grauvogl as special objects of attack, Virchow and Leibig. With regard to Virchow, he

says, page 38, "What he (Virchow) teaches about the cell, as the elementary part of life, are facts of direct perception which constitute the *extreme limit* of that kind of knowledge of the physiological school. But this does not suffice for therapeutics at all, however it may satisfy physiology. He nowhere gives us any intimation touching the chemical composition of the cell." Dr. Grauvogl certainly shows great ignorance when he quotes Virchow as the only authority on elementary structure. He would have us believe that none but Virchow in our school had ever searched for the ultimate atom, and that it was left for homœopaths (especially and mainly to Grauvogl) to discover the only true anatomical unit. He seems to ignore totally Fallopius, Haller, Schwann, Henle, Huxley, and Beale. He would have one believe, and it is so represented in some of the non-scientific reviews, that all the physiological school know about microscopic anatomy is taught by Virchow, and that we accept his teachings *in toto*. We have had fifty men investigating this subject where our homœopathic friends have had one—in this branch of the science, as well as all others, homœopathy has been a "humiliated beggar" to the physiological school.

It is *extremely difficult* for Dr. Grauvogl to understand anything which Grauvogl did not devise. It delights him to speak of "new and far-reaching discoveries," "of gross errors," of such-and-such a thing which "I (Grauvogl) was the first to point out." His egotism is beyond all comparison—it must disgust his most ardent admirers. At page 398 we find the following modest sentence: "The hollowness of the physiological school manifests itself as soon as its doctrines are analyzed as has been done in *this work*."

From page 318 to 381 he gives clinical cases. Grauvogl's patients always come to him after being treated by some one of the physiological school—as a general thing they have been given up to die. Grauvogl *always* cures them—not a single fatal case can I find recorded in his work. At page 158 commences a report of a case. I hope, gentlemen, that I shall not be deemed prolix if I transcribe a considerable part of it.

The patient was 40 years old, and had taken a cold; was weak in his limbs, and was incapacitated for work. On the 7th day Grauvogl took charge of him. Whatever might have been indicated, homœopathically, could not be given, for Grauvogl had no homœopathic remedies at his disposal. He had to take crude allopathic drugs and dilute them in common vulgar water, in order to give any medicine at all. On the 19th day we find the patient in this most remarkable and critical condition. The temperature began to sink—the pulse to increase in frequency till it reached 130; on the morning of the 23d day the temperature was 35.6 C.; the pulse became small, until finally it could not be counted; an erysipelatous bed-sore had formed on the left shoulder, the sacrum, and the two hip-joints. Now I quote *verbatim* from page 161: "The patient, fatally ill, had the following symptoms which the adherents of the physiological school cannot explain—constant trembling of the hands; utter insensibility of the body, except a sensitiveness to a lowered temperature, even from removing the clothes when dressing the bed-sore; the bed-sore on the sacrum became black and hard; the countenance of the patient was rather yellow; his cheeks less red; he lay in a profuse sweat, which stood on his face in drops; at night he was very much excited, and murmured constantly. \* \* \*. His deafness was complete; the sense of smell was blunted; the lips and nails were blue; the tongue was dry and hard as a chip, as were his teeth; speech was impossible; although he took the drink offered him as if involuntarily, though greedily, yet he clearly refused it when it was not sweetened with sugar; he was most fond of plum sauce, though swallowing with difficulty." etc., etc.

The symptoms enumerated are all italicized in the translation, and, I suppose, important. Concerning them Grauvogl further says: "What now? What allopath would not be utterly helpless in such a case, and declare the patient lost beyond all doubt? The homœopathist does not give up any patient as long as he still breathes, for the higher the difficulties rear their heads the more earnest is his zeal for the delivery of the patient. The consciousness of his superior power

holds him up; a power which rests upon the law of similarity; upon a law of nature; upon a rock, whence flow thousands of healing springs."

Who shall speak after such a gushing quotation? But the man lived. Grauvogl, unfortunate man, could not get to a homœopathic pharmacy, and he therefore mixed  $\frac{1}{2}$  gr. argent nitras in 4 ounces of water, and 5 grs. of quinine, with 5 drops of acid, sulph. dil. in 5 ounces of water—a spoonful of each was given every four hours. Of course, the medicine cured him. Great is v. Grauvogl!

In regard to the cause of tuberculosis, our author speaks with great certainty. On page 275 he says: "With the rarest exceptions, tuberculosis is produced by the ossification of the cartilage of the first rib." To some of our older men, who have made the subject of lung difficulties a life work, it will be news that a congenital and hereditary influence, climate, and various diseases have nothing to do in causing tuberculous deposit, but that, with the rarest exceptions, the disease is caused by the ossification of the first cartilage. Dr. Grauvogl, it will be noticed, speaks very *decidedly*. Grauvogl himself makes the statement.

It would have been well for the foremost of writers on homœopathy, since the days of Hahnemann, to have been a little less positive in some of his assertions. He desires to make the distinction between the two schools very marked, and in his ardor certainly makes many statements inexcusable, unwarrantable, and *false*.

Speaking of sun-stroke, on page 270, he says: "That physicians of the physiological school persistently, even to this day, prescribe general bloodletting." *This is not true*, and Grauvogl knows it, or ought to have known it before he wrote this book. Our authors and teachers are explicit on this point. General bloodletting is absolutely contraindicated, except in the apoplectic form of sun-stroke.

The work is filled with misrepresentations, and any one reading the book understandingly and impartially cannot fail to see them.

The author is a very unscientific writer. He makes mooted points indubitable facts, and contradicts himself and the school he represents again and again. On page 100, Part II, he declares, "that nothing which looks like a drug is allowed to be used," while on the following page he gives five rules where "*palliatives*" are permitted if homœopathy fails:

1st. He recommends tinct. opium to relieve pain, in from 3 to 40 drop doses.

2d. Emetics and castor oil sufficient to clear the intestinal canal.

3d. Iodide of potassium.

4th. The so-called diuretics in dropsy.

5th. Alkalies for neutralizing acids.

With one more quotation I am done with Grauvogl. On page 214, in speaking of the dose and remedy, I find the following extraordinary sentence: "The sole and simple question can only be what quantity of a substance, regardless of all subjective, convictions, and incomprehensibilities, is necessary in order to induce that chemical or physical counter-motion in any desired part of the organism, which is equal in intensity, and opposite in direction, to that which is induced by the morbid cause, in order to check this latter forthwith, or, at least, delay it, and then, by repetition, to remove it."

Now, here is a sentence taken *verbatim* from Grauvogl's book. What does it mean? Whatever its import, we must consider it as authority, for it is the utterance of a commander who "handles our leaders and smashes our idols." To me, *simply* and *only* this is meant. A patient has erysipelas, small-pox, or pyæmic fever. Such a dose of a certain remedy should be given (say nothing of the quantity) as will induce a chemical change in the specific poison of those diseases. In other words, neutralize the poison. Why was it necessary for Grauvogl to write 800 pages to tell his homœopathic friends this? It is taught in every college of the physiological school. We practice it every day of our lives. He says it must be "*equal in intensity*." Certainly it must, or it would not neutralize all the poison. He says, also, "*opposite in direction*."

How *opposite*, if homœopathic? If opposite, where comes in *similia*? Yet Grauvogl assures us that this is homœopathy.

In the first part of my essay, it was shown that with a great majority, at least, of homœopathsists, their practice does not differ from ours. Examining the quotations which I have made from Grauvogl carefully—divesting them of much which is superfluous, it is very difficult to find that he has discovered any new fundamental principles of medical science upon which the practitioner can rely in his daily practice, or upon which he can ever hope to establish a practice essentially different from that of the physiological school. He advances the same specious theories—makes the same unwarrantable pretensions, and surrounds all with the same halo of reflected light, as all of his predecessors, but he has not searched out any safe ways in which to walk, or new and firm foundation upon which to stand. His theories, with all of his class, are surrounded with much which appears new. They have made, and are now making, great efforts to harmonize their pet theories with the general laws of our being, respecting which there can be no difference. It has been utterly impossible for them to dose, and slowly but surely they have come back to nearly the point of their departure. After reading Grauvogl it is impossible for us to come to any other conclusion.

This then is HOMŒOPATHY.

---

### CASE OF PROTRACTED AND COMPLICATED DISEASE.

By L. D. ROBINSON, M.D., of Brookfield, Mo.

Having had, by the kindness and professional courtesy of my esteemed friend Dr. R. J. Scott, a limited connection with a case of rather unusual interest, in many respects, I propose to furnish you the facts for the pages of the *Examiner*, as they have been given me by one brief interview with the patient, by Dr. Scott, and as revealed by the autopsy.



Mrs. Logsdon, aged 40 years, of nervo-sanguine temperament, said, that while a resident in the State of Illinois, some seventeen years ago, she was attacked with what *she* believed to be milk-sickness—but her medical attendant termed it malarial fever; that the attack was severe and of long continuance; that she dreamed, while in a state of semi-delirium, that if she would swallow a couple of sewing needles she would soon fully recover; that she was a seamstress, had an ivory needle case nearly full of assorted needles, with top screwed on, that her best impressions were that she swallowed it; at all events, she could never, after her recovery, find the needle case. This is the history of the matter given by the patient, both to Dr. Scott, her medical adviser, and myself.

Some three years since, she lost by death her husband, from the effects of which she seemed to never fully recover, and in August of 1869, removed to this vicinity, and almost immediately called upon Dr. Scott for treatment. The Dr. says he found her considerably emaciated, and her general health much under par, with an obstinate vomiting; but discerned nothing unusual in her case. He diagnosed chronic inflammation of stomach, and instituted treatment accordingly—keeping it up from month to month with varied, and, upon the whole, rather unsatisfactory results, up to the month of April, 1870; the patient emitting pus from the stomach, and, at rare times, per anum.

Finally, during the month of April, 1870, Dr. Scott was summoned hastily to the couch of his patient, and she described a peculiar stinging, painful sensation in the epigastric region when she moved her body, and upon examination, the Dr. discovered, immediately underneath the skin, evidences of some foreign substance, and upon cutting down upon it discovered and removed two needles. It was then the lady first told him the needle-swallowing story. I should have stated, that the needles found in the epigastric region, were bright, free from rust, and points keen and sharp!

The Dr. continued the treatment of the case, endeavoring to tone up the general health, and gastric mucous membrane, but

with varied, and only partial, success—meantime he continued to extract needles, as they would come to or near the cutaneous surface, from one to eleven at an operation, the greater number from the epigastric and hypochondriac regions, removing a few, however, from the upper and lower extremities—numbering in all, including pieces, *one hundred and twenty-one needles*, all of which he still has in his possession!

Those removed from the lower extremities and feet, were somewhat corroded or rusted, the points being considerably dulled or blunted by the action on them of the acids contained in the juices of the body.

For one month prior to her demise she seemed to be in rather a better state of general health than usual, and did quite an amount of ordinary housework daily, as was her custom during the entire time Dr. Scott had her case under treatment, with the exception of an attack of prostration confining her to bed for a period of near seven weeks, which occurred something over one year ago. She had the care of three children.

On Thursday, the 20th July, 1871, she did a moderate washing in the forenoon, cooked the dinner meal for children and self, eating heartily, after which began preparation for ironing, meantime commenced mopping house-floor in a stooping posture. Upon raising up rather suddenly, was instantaneously attacked by syncope, and sank upon the floor; from that she did not react, but remained unconscious, with lividity of cutaneous surface, and general visceral congestions, until death closed the scene within two hours from the sudden attack.

When I saw her, and conversed with her, on or about the 1st of July, and heard her history of herself, her sickness, the swallowing of needle-case, &c., &c., and the loss, by disease and death of her husband, some three years ago, my opinion was, and still is, that her bad general health, the cares and duties of life, in bearing and rearing a tolerably large family of children, and finally, the loss of her husband, had induced chronic or habitual nervous debility, and, as a consequence, chronic hysteria, and that, in its turn, finally brought about that inexplicable mania which so often pertains to such cases; that in-



stead of having swallowed, *seventeen years ago*, an ivory needle-case, containing needles, she had been swallowing them, from time to time, for the past two years, in order to become notorious, and secure the sympathy of her children, friends, and medical advisers; and Dr. Scott, with his very intimate intercourse with, and knowledge of, the case fully agrees with me in this view of the case.

*Item.* She had at one time strenuously claimed that she went *seven weeks* without one particle of nourishment, (other than a small amount of coffee daily,) and without a single evacuation of the bowels for five weeks of the seven! Yet was not in the least emaciated more than usual!

Also, a few days prior to death, she seemed to think the Dr. was not taking as much interest in her case as usual, as no needles had been extracted for several weeks, and but few, if any, persons had called to see her, as many had hitherto been doing, the people regarding her a sort of prodigy. She sent to the Dr., in a paper, what she represented as a portion of the ivory case, which she alleged, had been ejected from the stomach by emesis a few hours previously. Upon careful examination, the specimen sent by her, was found to be, unmistakably, pulverized muscle shell!

**AUTOPSY.**—Owing to a combination of circumstances, the *post mortem* examination was not had until forty-eight hours after death. In company with, and through the kindness and courtesy of, Dr. Scott, he and myself conducted the autopsy by first removing and examining the stomach, which we found entirely empty, but inflated with gas. There was general softening of its mucous membrane, with general dark-grayish discoloration.

We next examined the liver, spleen, pancreas, and abdominal viscera in general, finding nothing unusual or abnormal, save a pale, flabby, attenuated condition of the parenchyma of liver, spleen, pancreas, &c.

Upon opening the thorax, we first observed the heart to be about two and a-half inches above its normal position; whether this abnormality was congenital or otherwise could not be deter-

mined. The heart was much attenuated in its walls, and also atrophied—the walls of the auricles being almost as thin as the paper I write on. The walls of the ventricles correspondingly so. When it had been removed from the thorax and was laid upon the table, instead of maintaining its normal shape and rotundity, it would, of its own weight, flatten down into a shapeless mass, like a wet cloth.

The lungs were thickly studded with the miliary tubercle, but no vomica. The patient had never manifested any symptoms of lung trouble. Right lung and pulmonary pleura were firmly adherent to costal pleura; about two inches in diameter of the superior lobe of lung being thus adherent to walls of the chest.

We then examined the œsophagus, along its entire length, in order to ascertain if any recently-swallowed needles had lodged there, but found none.

The patient was very anæmic, and blood much impoverished.

Now, what caused the sudden death, and what was the mode of dying? Had the needles anything to do in the case? Dr. Scott arrived at the bedside of the patient near one hour before death, and from the Dr.'s description of the case, and the death, and from what light was thrown upon the subject by the hurried autopsy, we have come to the conclusion that it was death by syncope.

The heart being atrophied, and very weak, the blood very deficient in iron, especially the bloodvessels being much relaxed, and their calibre enlarged, when the patient stooped over, there was an unnaturally full rush of blood to the brain, and when the erect posture was assumed, there was an equally free and abnormal efflux of blood from the vessels of the brain, and a fatal syncope the result—the enfeebled heart and arteries, and want of natural stimulant property in the blood to prompt the heart to action, being sufficient evidence of the fact to sustain this hypothesis.

Again:—Were the needles swallowed seventeen years ago, screwed up tightly in any ivory case, as the patient claimed? Or is our prediction correct in taking the position that she had

been swallowing them, from time to time, within the past two or three years?

P.S.—I am indebted to Dr. R. J. Scott, of this place, for all the knowledge I have of this interesting case, and it is by his request that I have thus shaped up the facts for publication.

R.

---

### DISEASED KIDNEYS IN SCARLATINA—EXPERIMENTAL STUDIES THEREON.

By DR. CARL PROEGLER, Aurora, Ill.

During two epidemics of Scarlatina in New York State, I found that as late as up to the sixth or seventh week of continued illness, a great "desquamation" of the whole body of the patient took place. They were extreme hard cases, and combined with disease of the kidney. As soon as desquamation began, "albuminuria" and "hydrops" disappeared, and the patient got well. I concluded therefore to see whether there was a closer connection between the disease of the skin and kidney in Scarlatina, as there is at the present time thought of.

I used for the experiments rabbits. I suppressed the function of the skin by painting them partly over either with oil, gum, varnish, &c., or to produce inflammation of the skin I used croton oil and turpentine. I experimented on 13 rabbits. Two of them died after 40 hours, four in the first 24 hours. With the first six I noticed four times "albuminuria," once the urine was free from "albuminuria," and once I could not get any urine. The animals died, all with the same symptoms. Respiration, first superficial and quick, began to get slower and deeper. The extremities and ear cold, and death ensued by convulsions. The anatomical changes were the following:—the skin showed on the places where it was painted over, very large and strong injected vessels; greater and smaller petechias; subcutaneous tissues very moist; the inner organs very sanguinous; the right heart contained dark and badly coagulated blood. The kidneys, which were very dark and sanguinous, by examination did not

show any change of tissue by microscopic examination. Four others of the rabbits died in the course of six and nine days; one on the third. In four cases albuminuria was very great, the filtered urine showed but few morphotic substances, some epithelium and lymph globules, only in one instance they were more abundant, and appeared to be more transparent in cylindrical shaped form of pale opaque color. One of the animals died with pleuro-pneumonia on the right side, and strange enough, without any albuminuria.

In the four cases the following were the changes of the kidney, they seemed somewhat larger than normal. The outer surface smooth, the capsule easily to divide. The substance very dark and sanguinous, the "corticulis" dark redish-brown, interlined on some places with pale yellow stripes. The papilla of light rose color. The microscopic examination revealed the epithelium of the tubuli uriniferi somewhat shaded and enlarged. The glomeruli were very sanguinous, therefore not very transparent. The epithelium of the capsular dilatation of the malphigian body were normal. The epithelium of the straight tubes were normal, transparent, and well preserved. The bloodvessels of the "medullar substance" very strongly filled with blood. In the interstitial tissue of the kidney nothing abnormal could be found in the three cases; in the fourth case the interstitial tissues of the kidney were filled with dense masses of partly round and partly long-shaped corpuscles, the first a little smaller than white blood corpuscles, but with the same appearance. The central part of them could not be discerned.

Of the two last rabbits, one lived 15 the other 19 days. They both had on the first day "albuminuria." The residue of the urine showed "lymphoide corpuscles," with thick and red cells (dead epithelium) and red blood corpuscles; fatty and cylinder-shaped conglomeration, could not be found. The kidneys of the first animal (15 days) was very sanguinous, and the microscopic examination revealed the same facts as already mentioned, with the only exceptions that the "glomeruli" looked pale and bloodless, and that the free capillaries of the outer surface of the kidney were strongly filled with blood. The animal dying last,

the kidneys were pale, the cortical substance wider than usual, and of a dirty yellow-gray color. In the last instance the epithelium of the "tubuli uriniferi" was not very clear and not transparent. The tubes seemed to be filled up with a dark mass resembling fine coarse sand. Bodies of destroyed epithelium could be seen. No fatty degeneration. In the straight tubes the epithelial cells were well preserved and transparent. No interstitial changes of any amount.

By my experiments I draw the following conclusions:—  
 "Large inflammatory diseases of the skin will lead to diseased changes of the kidneys, first to active hyperæmia, which will, by long duration, give rise to parenchymatous and interstitial anomalies of the tissues." Taking these results with the experiments in scarlatina together, we will find that at least part of diseased kidneys in scarlatina are produced not only primarily by the "scarlatinous poison," but secondary in consequence of "scarlatinous dermatitis." In healthy adults skin and kidneys will sustain each other. But in scarlatina the inflamed skin cannot fulfil its function, but how is not yet quite clear, and the whole function is thrown upon the kidneys. This causes "hyperæmia," and, in longer duration, inflammatory changes of the kidney. It has been very often noticed that where "albuminuria" could be detected the secretion of urine is greater. But the beginning and cause of scarlatinous diseased kidneys has not revealed anything specific. Thomas (Virchow's Archiv.) tried to explain some "cylindroide," but they can be found with any catarrhal symptoms of the urinary ducts. That they originate from the kidneys, on account of their curious shape is not very probable, and their relations with the ureters, on account of the "microchemical properties," rather dubious. If you add highly diluted hydrochloric acid to the urine, it will not dissolve, but add to it a little concentrated nitric acid they disappear, more resembling therefore the "mucus" than the "albumin." I never noticed changes of the cylindroide on the "ureters." I take them therefore for curious-shaped masses of mucus, and have for the kidney in scarlatina no practical bearing. But why scarlatina is so often complicated with kidney disease, more

so than in "acute dermatitis," is at the present moment not easy to say. The reason may be, that scarlatina covers the skin fully, unlike "morbillen" and "variola," where one may find between their efflorescence yet sound skin. My experiment shows that the skin in scarlatina claims our first attention. Baths and ointments of "glycerine salve" or Cologne water to be used externally, with the use of supoforics internally, etc. Belladonna, which has been claimed almost as a specific, has entirely failed in my hand.

---

### SYPHILITIC PARALYSIS.

By LYMAN WARE, M.D., Chicago, Illinois.

It may sometimes be questionable whether it is profitable to the general practitioner to have extraordinary or rare cases written out and reported, their utility not being sufficiently apparent. Yet, in those cases which have been much neglected by our text-books, and where the pathology and consequent mode of treatment has not been fully determined upon, and where, also, prompt and definite treatment alone could substitute enjoyment for untold misery, it may not be altogether a waste of time and labor to call special attention to the study of a few cases of syphilitic disease of the nervous system which are complete in their history and typical of their kind.

Some of the earliest writers, as early even as the sixteenth century, made mention of nervous affections following far in the wake of primary syphilis. Still, there was so much of vagueness and uncertainty surrounding the cases reported, that the facts deduced from their observations were not generally accepted. So eminent a light in the medical world as John Hunter strongly denied that the brain or nervous system could be ever affected from syphilitic disease, and the celebrated Sir Astley Cooper, says, in his *Principles and Practice of Surgery*, "Some parts of the body are incapable of being acted upon by the venereal poison, as the brain, heart, and abdominal organs;



indeed, the venereal poison does not appear to be capable of exercising its destructive influence on the vital organs, or those parts most essential to the welfare and continuance of life; but the bones, muscles, and skin readily partake of its malignant nature."

The positive opinion of gentlemen so highly esteemed for their profound knowledge and great skill must have blinded their cotemporaries and followers to the perception of an important truth, and retarded the recognition of a truly terrible class of maladies, otherwise, it would be unaccountable how a disease, now so fully admitted, should have been unrecognized and unacknowledged for so great length of time by men of undoubted ability and knowledge, as it is now proven by *post mortem* examinations, beyond the possibility of a doubt, that the most troublesome and dangerous tertiary symptoms are those of the nervous system.

Among the first who called special attention to syphilitic nervous diseases, giving a full account of the *post mortem* appearances, was Dr. John Watson, of New York, who published his cases in the *New York Medical Journal*, of 1843 and 1845, since which time numerous articles have appeared, both at home and abroad, corroborating the fact that syphilitic deposition may take place, either in the brain substance itself, spinal cord, or their membranes. The morbid appearances, as most commonly seen, are thickenings and adhesions of the *dura mater* to the base of the skull and brain, covered here and there with nodules, varying in size from a pea to a walnut, and of a dark yellow color. At times, these nodules are found in the brain substance itself, producing irreparable mischief, or entirely surrounding the roots of special nerves, causing local paralysis, or, seated in the cord, giving rise to complete paraplegia.

It is not yet possible to determine definitely, from *post mortem* appearance alone, syphilitic from ordinary tubercular deposit, still, by adherence carefully to the history and symptoms of the case, a line of demarcation may be drawn as distinctly as between many other diseases. Where there is



syphilitic deposition, we have great and excruciating pain, particularly of a nocturnal character, with the presence of other tertiary symptoms, involving the skin, the bones, or both.

It is of the greatest importance that the true condition be early detected, and heroic specific treatment be at once adopted, else curable paralysis, *without* organic lesion, may be followed by incurable paralysis, with organic lesion. The spinal cord is less frequently affected than the brain, although precisely in the same manner. The *dura mater* of the cord being the original seat of inflammatory thickening, the exuded lymph is deposited entirely about the cord, greatly interfering with, or quite destroying its action. Interstitial inflammation and gummy tumors have been discovered in the substance of the cord, as well as in its surrounding membranes, producing complete paraplegia. In fact, paraplegia with violent sciatica, particularly on the left side, is the most common symptom of the disease in the cord. The diseases of the nervous system are gradual in their development, and those of the cord seldom make their appearance until years have elapsed after the primary lesion, which has been of either unusual violence or treatment much neglected. Loss of muscular power, or power of co-ordination, may exist, simulating progressive locomotor ataxia, from which it may be distinguished by the history and the excruciating nocturnal character of the pain in the lumbar region, extending into the loins and thigh, following the course of the sciatic nerves.

The cases given are from the private practice of the writer, and are gentlemen whose statement of facts can be fully relied upon.

The first, a case of syphilitic paraplegia, in which the exudation or deposit must have been of recent origin, judging from the rapidity with which the symptoms yielded to treatment. The second, a case in which the deposit was confined to the trunk of the *portis dura*, producing facial paralysis.

Mr. A. is a gentleman of more than usual intelligence; 34 years of age; a professional actor, and of general good health. In 1858 or 1860 he contracted syphilis. He and his mistress

were subjected to treatment at the same time. Being then actively engaged, he does not remember as to the length of time he was under treatment, but thinks about a month. He suffered no inconvenience, nor did the disease in anywise show itself until the winter of 1870, ten years after inoculation, when he had a large rupial ulcer on either tibia, which was only healed upon resorting to constitutional treatment, leaving the scars and peculiar tint still well marked. As soon as the ulcers healed medication was at once discontinued. No inconvenience again occurred until the winter of 1871, when he was troubled with occasional nocturnal pains in the tibia and lumbar region, for which he received alterative treatment of iodide of potassium, keeping the pains in check, though not subdued. In April, the pains returned with much greater violence and longer duration. In fact, he was scarcely free from them at any time, although they were much worse at night, even so excruciating as to keep him awake, and oblige him to spend many sleepless nights. During the second week of June, weakness of the lower extremities began to make itself manifest, unsteadiness of gait, inability to go up or down stairs, or walk any distance. This condition gradually terminated in complete loss of motion. When I first saw him, on the 12th of June, he was not only unable to walk, but he could not even stand unsupported, and required an assistant to turn him in bed. The lumbar pain was excruciatingly violent; the lower limbs were cold and numb, and, though movable, there was loss of co-ordination, resembling locomotor ataxia; no trouble in urinating or defecating; electro-muscular contractility, and sensibility diminished. Ordered iodide of potassium in ten-grain doses, three times daily, and a mercurial vapor bath at night; administered galvanization of the spine and lower extremities, by a current from a 32-cell battery; seance eight minutes, caused profuse perspiration.

*June 13.* Pain not so excruciating, and was able to sleep more the past night; symptoms otherwise unchanged. Treatment continued, excepting general and local faradization, which was substituted for galvanization.

*June 14.* Not so well; had more pain and less sleep than on the preceding night; medication continued, and galvanization again resorted to instead of faradization, also ordered jugs of hot water to the feet at night.

*June 15.* Patient much better; had a tolerable night's rest; galvanization employed, seance lasting ten minutes.

*June 16.* Patient decidedly better; slept well the past two nights; limbs not so cold and numb; prickly sensation much diminished. He now feels confident that he will recover. Internal treatment unchanged; vapor bath and galvanization only to be employed on alternate days. Patient went on rapidly toward recovery, so that by the latter part of the month he could walk by the aid of a cane, and on the 10th of July he could walk as erect and as firm as ever. Although he is still under treatment, it is more to prevent a recurrence of the disease, than a necessity for its continuance.

Nill says, "The course of the affection is slow, and, though it may be checked by treatment for a time, is seldom cured." Barton says of these cases, "They advance to a certain point toward recovery, but complete restoration does not take place."

Was it galvanization or early treatment that prevented so untoward a termination?

Mr. L. a sailor; age 38; had syphilis sixteen years since. Primary disease healed quickly under his own treatment, subsequently had sore throat, which rapidly healed by internal medication during a short stay at the hospital. Has had, at times, after unusual or severe exposure, "Ricord's tertiary accidents."

In 1869, fourteen years after the primary lesion, facial paralysis gradually made its appearance. When he first came under treatment, in January, he had been for the eighteen preceding months under homœopathic treatment for paralysis, but not for syphilis. The right angle of the mouth droops; the cheek hangs loose; features much distorted; diminution of sensibility not perceptible; farado-muscular contractility lost; galvano-muscular contractility normal; iritis with adhesions in the left eye from former diseases. Placed at once

upon pil. hyd., with inunction of ungt. hyd. at night, and administered galvanism every second day, applying one electrode either over the mastoid process or articulation of maxilla, and the other upon the paralyzed muscles. After the second seance there was decided improvement, and after the tenth, restoration was so nearly complete that further application was omitted.

This case is particularly interesting, showing, as it does, the diagnostic value, pointed out by Duchenne, of determining the seat of the disease by the current, the indirect current or faradization being powerless when the paralysis is of peripheral origin. As he improved the muscles gradually responded to the secondary current.

---

### TREATMENT OF LUPUS EXEDENS.

By E. ANDREWS, M.D. Prof. of Surgery in Chicago Medical College.

The vagueness of diagnosis which hangs like a cloud about the subject of lupus, prevents the development of well-defined ideas of its treatment. The London Hospital for skin diseases employs the actual cautery in most cases, and many surgeons in private practice do the same with excellent effect. The horror of patients at the idea of the hot iron renders it, however, a rather inconvenient remedy in American practice. The German surgeons also complain of the extent of the cicatrices produced in this way. Hebra prefers to gouge out all the tissue which can be reduced to a pulp by the action of the finger nails. R. Vollmann, of Halle, takes the following course:—with an instrument like a small spoon, he first scoops away all the tissue which will yield to its scraping action, forcibly applied, then with a tenotome, or other small knife, he makes innumerable minute slashes and stabs into all the affected vascular tissue around, cutting until he reduces it to a sort of mince-meat, without, however, destroying the vitality of any of it. The ulcers then begin to heal, and the contraction of the multitu-

dinous small cicatrices reduces the affected surrounding tissue to a nearly natural condition. I have recently tried this plan with excellent effect in Mercy Hospital. The patient had lost the septum narium and part of the border of the nose, and of the upper lip. I removed all the diseased parts which would yield to a vigorous scraping action, and then slashed and stabbed all the red tissue in the vicinity. An immediate improvement began to take place, and in about four weeks the parts were healed. The tip of the nose, which had been drawn down, closing the orifice of the nares, and rendering respiration by that passage impossible, was supported by a gutta percha tube, and, as the cicatrix grew firmer, showed its power to maintain its position without further help. On the whole the results were so favorable as to give great encouragement to the further trial of Volhmann's method.

CHICAGO, No. 6, Sixteenth Street.

---

### Correspondence.

---

#### RARE CASES.

MILWAUKEE, *July 15, 1871.*

PROF. BYFORD,—DEAR SIR:—The liberty I, a comparative stranger, take in addressing you, will be excused, I hope, on the ground of the singularity of two cases which have lately occurred in my practice, and which it is the object of this letter to communicate.

On the 4th of March, last, Mrs. ——— aborted, and so suddenly that she had not time to get to bed before delivery of a fœtus of about four months. Her husband carried her to bed, and, in doing so, the fœtus, with cord, was detached at placenta. On examination, I found the os tincæ but little dilated, and so exceedingly sensitive that I deemed it best to leave placental expulsion to nature. After an hour or two, gave ergot—no effect; then uvi ursi, with no better success. After three or four days' confinement to bed she arose, and resumed her

usual vocations, which she continued to follow with little or no inconvenience till the 21st of June, when I was summoned in haste to her bedside. Hemorrhage had suddenly occurred, and when I arrived she was cold and pulseless. I introduced two fingers and delivered the placenta, of normal size and condition, without the slightest approach to decomposition. The woman made rapid recovery.

Here is a case of placenta retained for nearly sixteen weeks, during the first four of which there was not even a lochial discharge; no enlargement of the breast, and for nearly four months the patient following her usual vocations—visiting her friends, and attending to household duties as usual. *At the end of four, and again of eight, and then of fourteen weeks, she menstruated regularly, and, to all appearance, healthily.* Has such a combination of symptoms and circumstances, usually, or even occasionally, been met with?

Two days ago, I visited a child three weeks old. At eight days old the nurse discovered milk discharging from the breasts; she daily, as she informs me, pressed from breasts one or two spoonful of milk, and, as the secretion was increasing, the mother had the "milking" discontinued, with the intention of "drying up." When I saw her the mammary glands were hard, swollen, and inflamed, presenting in miniature a precise counterpart of an incipient abscess in breast of adult. I ordered poultices sprinkled with g. camphor. To-day, the inflammation is subsiding, and I hope to entirely arrest it without suppuration.

I shall deem it a great kindness on your part if you will inform me whether you have met with any such cases, or whether you are cognizant of similar recorded cases. I find none corresponding.

I am, dear sir, yours, very truly,

ALFRED L. CASTLEMAN, M.D.

### Proceedings of Societies.

#### ÆSCULAPIAN SOCIETY OF THE WABASH VALLEY.

THE Semi-annual Meeting of this Society convened at Effingham, Ill., May 31st, 1871, Dr. Wm. M. Chambers, president, in the chair; Dr. R. L. Wallston, of Paris, Secretary *pro tem.*, read the proceedings of the Annual Meeting, when Dr. G. T. Ragan, of Neoga, was selected as Secretary for the remainder of the session.

After the usual business in form and the discussion of some subjects not of general interest, Dr. C. B. Cannon, chairman of Committee on Surgery, read a very interesting paper, especially written to give the author's views in regard to his experience in the use of the hypodermic injection of morphia as a curative agent in disease. His attention was called to this method in the treatment of sciatica and delirium tremens in an article in *Braithwait's Retrospect*, in 1861. Shortly afterwards commenced using it, but found the facts given in *Braithwaite* were not fully verified by personal observation, such as obtaining relief and sleep in five minutes after injecting one grain of morphia. It was often fifteen or twenty minutes, and then instead of quiet sleep, lasting from twelve to twenty hours, there was wakefulness with troublesome vomiting. This discrepancy was attributed to the physical condition of the patients. In hospital, the patients had been reduced in flesh, worn out by pain, physicked and dosed with all the usual remedies for sciatica before the injections were used. In the Doctor's private practice, his patients had no preparation whatever, but when he did prepare them uniform success followed, and he now feels free to say that any case of idiopathic neuralgia, wherever it may be located, will yield, after the proper regulation of the bowels, to the hypodermic exhibition of morphia in full doses; would use from two-thirds to one grain of the salt, according to the condition and habits of the patient, sufficient to produce narcotism, and make a profound impression on the nervous system. Ordinary idiopathic neuralgia, dum ague, sun pain, from malarial causes, will



yield to a single administration. No treatment will be successful in neuralgia dependent upon nervous irritation, caused by spicula of bone or ulcerated tooth, until the exciting cause is removed. Cases complicated with other diseases must be treated in accordance with the complications. Has never seen a case of gout, but has little doubt that after the preparatory treatment and the administration of colchicum, the nervous impression made by narcotism, induced by injection, would stop the paroxysm. Reported a case of a lady aged seventy, had been suffering from facial neuralgia for five years, had been treated by regular physicians and travelling quacks without any permanent relief.

The teeth all having been removed from that side without any salutary effect, the Doctor removed a portion of the jaw-bone, followed by tonics and anodynes, still only temporary relief; as a last resort, determined to use the injections; and accordingly, localized a full portion of morphia near the seat of the pain. The patient soon passed into a sleep that lasted through the afternoon and following night, she awoke next morning free from pain, and since that time has never had a single paroxysm and is fully recovered. Had used the injections several times in delirium tremens with very unsatisfactory results.

The want of success may be attributed to two causes: First—The extreme tolerance in this disease of the nervous system to the effects of opium; and secondly, that many of the so-called cases of delirium tremens, especially the fatal ones, are really the result of organic lesion within the brain, and the connection between the sensorium and the ultimate ramifications of the nerves is so modified by disease as to render powerless any influence to produce sleep. Remarks were made by Drs. Miller, Todd, and Chambers in support of Dr. C.'s views. Dr. Chambers thinks the solution should be recent, it loses its virtue by age; he never goes abroad without his hypodermic apparatus, prefers the sulphate to the acetate of morphia.

Dr. Wallston read the report upon obstetrics which elicited a general discussion. Dr. L. J. Willien reported a case of ulcer-

ation of the neck of the uterus of five years' standing. Mrs. L. Z., aged 22, nervous lymphatic temperament, light complexion—large—had menstruated for the first time at the age of fifteen, painful menstruation ever since, married at seventeen, general health good till after marriage, when menses were suppressed and replaced by a white mucus discharge which gradually became a constant flow, and lastly, becoming of a pasty and yellow-green color. This continued till 1867, one year after marriage, when a high state of chlora anæmia existed, with discoloration of conjunctiva and lips, fauces pale, extremities cold, vertigo, palpitations of the heart, with a clear bellows-sound extending along the carotids anorexia, and constipation; neuralgic pain darting to and from the chest, and then through the lower part of the bowels. At first sight supposed the uterus to be the seat of the disease, but patient not consenting to an examination, ordered antispasmodics, ecbolics, tonics, such as cinchonia and iron, good diet, and astringent injections,—temporary relief followed. March, 1871,—was called to see her; the general symptoms of debility having increased; this time, having become wiser, she consented to a vaginal exploration with the speculum; the following condition was discovered:

1st. Engorgement of the cervix uteri.

2nd. Ulceration of the anterior labia extending into the os.

3rd. Abundant muco-purulent discharge from the os; this being very acid, as shown by the application of blue litmus paper. The external organs were pale, relaxed, and also the mucous membrane of the vagina.

Therefore, determined to submit the patient to a local and general treatment. After removing all mucosities from vagina and neck of the womb, made a free application of lunar caustic to the ulcer, and into the cavity as far as could reach, and applied a small cotton plug, imbibed with a mixture of carbolic acid twelve drops to glycerine one ounce, the plug to be removed next morning, and followed by a weak solution of bicarb. of soda. On the third day, found the discharge more abundant, but of a thinner character, the ulcer appeared red and granulating; lunar caustic was again applied and dressed as before.

Tenth day, the patient says she is improving, appetite returns and the pain in the lower part of the abdomen is less severe. Fifteenth day, the ulcer is disappearing and replaced by healthy granulations. Caustic is omitted and carbolized glycerine injected into the cavity of the neck and the plug applied. On the seventeenth day, after sleeping well during the night, she awoke, and found to her great surprise her menses had appeared, not evincing the least pain or uneasiness; this lasting five days, after which time, the leucorrhœal discharge subsided rapidly, the ulcer healed, and the engorgement has entirely disappeared. Twice weekly dressed the parts, using the astringent lotion, *viz.* :

R <sub>y</sub> .	Sulph. Copper, -----	3j.
	Tannin, -----	3ij.
	Rose Water, -----	3j.
	Carbolic Acid, -----	gtt., xvi.
	Rain Water, -----	3ij.

Sig. Imbue the cotton plug with this solution, or if the orifice permits, inject or apply with camel hair brush.

This to be used every day internally to calm nervous hyperæsthesia :

R <sub>y</sub> .	Hydrate of Chloral, -----	3ij.
	Elix. Val. Ammonia, -----	3j.

M. 3j every hour or two.

As a tonic and alterative.

R <sub>y</sub> .	Iodide Potass., -----	3iv.
	Elix. Protox. Iron and Cinch., -----	3viii.
	Tinc. Rhei, -----	3ij.

M. Dessert spoonful four times a day.

To assist the digestive organs, create appetite and overcome constipation, the following pill :

R <sub>y</sub> .	Ext. Nux Vomica.
	“ Belladonna.
	“ Stramonii.
	“ Conii Mac.
	“ Rhei, āā gr. vi.
	Pul. Aloes locot, gr. xxiv.

M. Ft. Pil. No. xxiv, one pill ter die one hour before meals.

This prescription against any scrofulous or malarial tendency.

R. Syr. Ferri Iodide, ----- ʒj.  
Solution Fowleri,----- ʒijss.  
Aq. Menth. Pip.,----- ʒij.

Sig. Teaspoonful three times a day, one hour before meals. Also ordered lotions along the spine and abdomen with good whiskey and dry friction on the skin. May 11th, patient enjoys good health, and all symptoms of anæmia have subsided.

Dr. L. L. Todd reported a case of eclampsia treated successfully with chloroform and hypodermic injection of acet. of morphia. Would use the injections again under similar circumstances.

An animated discussion on the arrest of hemorrhage in placenta previa was participated in by a number of the members, for and against turning, and the use of the tampon. The objection, on the part of some, to the use of the tampon seemed to result from a misconception of the philosophy of its application.

Dr. J. H. Apperson reported a case of peculiar condition of adherent placenta, termed by him, fibrous tumor adherent, and in common with placental mass. *Post mortem* revealed the fact, that the tumor, uterus, and placenta were inseparable, the union being so complete. Dr. Todd thought it a case of fibroid degeneration of placenta.

Dr. Wm. Massie made a verbal report of a case of senile gangrene, patient eighty-two years of age, infirm, constitution dyspeptic. One year ago, last Feb., his nails on left foot hurt him,—pared them closely, became very painful, lost several nights' sleep. The Doctor found no cause for pain, except from paring the nails. After several days, a dark spot appeared, this sank and left an eschar, then an ulcer. He wore a mocasin all summer, foot cold all the time. In Feb. of this year, horse trampled on this foot, divided a small place over the metatarsus. Whenever the foot was warmed, it gave him great pain. He commenced losing flesh; called on the Doctor; began treatment to stimulate action; the flesh sloughed to the bone. Both feet became swollen, also face and hands, went down rapidly, then seemed to rally. In two weeks toe began to mortify, the next toe began the same way, not in connection

with the former. One after another went the same way, till all died, when the foot began; sometimes the mortification would stop for three or four days, when ease would follow, the line would advance and stop; has not advanced for four or five days at this date, very black below the line.

Dr. Willier reported a parallel case in his own practice, which went on till the leg to the lower one-third of the thigh was dead, when the other foot began in the same way. At death, the flesh had all fallen off the legs; tried everything without relief.

Dr. Miller wanted the pathology of the disease. Dr. Chambers says the pathology is uncertain. If from a plug in an artery the remedy is amputation, if not, all the treatment necessary is opium to relieve pain, and food; advises not to amputate. Dr. Wallston would, as a last resort, use transfusion.

Dr. Geo. Kilner read an exceedingly instructive and valuable paper on the common diseases of the eye, which was ordered to be published by request of the Society.

Dr. J. L. Reit, from the committee on epidemics, read a report. Dr. Massie said the principal treatment of small-pox would be isolation and ventilation; would place his patient under shade trees; thinks the mortality in this disease should not be more than one in three hundred. Dr. Chambers would add to the treatment mur. tinc. iron; Dr. Miller, in petusses, uses brom. of amonium and veratrum.

Dr. M. W. Wilcox reported on practical medicine. The report was long, and prepared with great care; thinks if the practice of medicine could be established on some permanent basis, the task of reporting on it would be easy, but the great question regarding the treatment of disease, notwithstanding all the improvements; is but little nearer solution now than in the time of Hypocrates. Still he thinks the evidences of a steady improvement are most conclusive; ignorance within, and prejudice without, account for much of the failure.

Medicine now, is not only acknowledged to be a science, but a science necessary to the happiness of our race. The various systems of practice exert but little influence in disturbing the current of public and professional opinion. The great mass of

intelligent men look for relief to the system represented by ours and kindred associations. It is a satisfaction to know that practical medicine is keeping pace with the march of mind. Though not equal to every emergency, we are yet accomplishing all that it is possible for the finite mind, when it enters the field to contend with the decree of fate. Mathematical certainty will never be arrived at in our profession. Our success will ever depend on our knowledge of auxiliary sciences and our power to adapt remedies so as to meet the emergencies of each individual case. We should profit by what has been done by others; the experience of everyone, however limited, is valuable. Although everything is changing, every change is not necessarily an improvement; the present time is productive of more that is of practical benefit than any previous period in the history of the sciences. He has used many of the new therapeutical agents with greater or less success, but is not disposed to abandon old-tried and proved remedies; the medical man, by their use, is in danger of pandering to the patent medicine system.

Subcutaneous medication is claiming considerable attention, and is growing in favor rapidly. Thinks nervous diseases are on the increase in his locality. If, as Prof. Aitken intimates, this is dependent upon extreme mental effort, there ought to be a corresponding increase of mental power,—this is not obvious where he resides.

Dr. Apperson read a carefully-prepared and elaborate paper upon "Gastric Juice." He objects to the term gastric juice, prefers "solvent." He reviewed at some length the five different theories, *viz.* : coction, putrefaction, trituration, fermentation, and chemical solution. After looking carefully over all the experiments and speculations of late authorities, he has the *courage* to say that there is yet error, and that the true source of the solvent of the stomach remains to be pointed out. His proposed theory differs in some respects from all preceding ones. All agree that digestion is performed in the stomach, but Dr. A. objects to the solvent being secreted by the coats of the stomach because of *its want of a glandular system*. Claims

the glands of the mouth as furnishing the true solvent. Has arrived at this conclusion from observation on his own person through a long series of years, and from observation on ruminant animals; and the effects of medication in case of dyspepsia, claims that the saliva obtained from the parotids, sublingual and submaxillary glands furnishes the true solvent. The Doctor's conclusions were well drawn, and his arguments sustained by facts. Dyspepsia arises from a want of the true solvent, and is cured by its supply through the act of mastication of solid bodies without artificial diluents.

Dr. Chambers reported a case with unusual symptoms. Man, aged 38. For nearly three years past, every night when he goes to bed, and first falls to sleep, he ceases to breathe, and when aroused by his wife, who has to remain awake till after she arouses him from his first sleep, it is with great fright and most fearful sensations and apprehensions. The Doctor has treated the case for eighteen months, with but slight relief, from brom. potass. and Hall's solution of strychnine. Patient has had two attacks of intermittent fever; during the prevalence of the fever the unaccountable symptoms abated; no satisfactory diagnosis of the case.

Dr. Willien reported a case of calculus nephritis; treatment followed by recovery.

*Treatment.*—Externally, blister. Internally, with the following mixture :

R $\bar{y}$ . Potass. Acetatis, -----	℥ss.
Vini Colchici, -----	℥ss.
Spts. Nitroci Dulcis, -----	℥j.
Tinc. Opii Camph., -----	℥ss.
Fl. Ex. Belladonna, -----	℥j.
Aq. Cinnamomi, -----	℥ss.

M. Sig. One teaspoonful every three hours.

Next morning calculus passed the urethra. Weight, qrs. v. Phosphate lime. Immediate recovery.

The Society adjourned to meet in Paris, Ill., on the last Wednesday of Oct., 1871.

WM. M. CHAMBERS, *President*.

G. T. RAGAN, *Secretary*.



---

**Book Notices.**

---

On Some Diseases of the Nervous System in Childhood: being the Lumlian Lectures Delivered at the Royal College of Physicians of London, in March, 1871. By Charles West, M.D., Fellow and Senior Censor of the College; Physician to the Hospital for Sick Children. Philadelphia: Henry C. Lea. 1871.

This is a neatly published duodecimo volume of 131 pages. It is made up of three lectures, the first, on Neuralgia and Epilepsy; the second, on Chorea and Paralysis; and the third, on Disorder and Loss of Power of Speech, Mental and Moral Peculiarities and their Disorders. The author is one of the most experienced and able writers on the diseases of women and children that we have in the profession; and the present little volume will be found worthy of perusal by every practitioner.

---

Braithwaite's Retrospect of Practical Medicine and Surgery. Part LXIII. July.

This well-known and valuable semi-annual publication is on our table with its usual punctuality, and filled with its usual valuable collection of materials from the Medical Periodical Literature of Europe.

---

American Journal of Obstetrics and Diseases of Women and Children.

This very valuable quarterly is now published by Wm. Baldwin & Co., Publishers, New York. Price \$5 per annum.

---

**Editorial.**

---

**PUBLIC MEDICAL LIBRARY.**—The members of the Chicago Medical Society are making earnest efforts to found and support a public medical library. They have already secured lib-

eral donations and most ample and permanent accommodations in the fire-proof library building of the Young Men's Christian Association.

The library will be open daily from 9 A.M. to 10 P.M., for the public, as well as for the profession.

Will friends throughout the Northwest aid the Society in obtaining complete files of the various medical periodicals of our country, by sending stray numbers of such journals to the library.

Old catalogues of our various medical colleges are desired.

Small packages can be sent by mail; large ones, forwarded by express, will be received and charges paid by the librarian, at the rooms of the Y. M. C. A. Library.

#### THE LIBRARY COMMITTEE.

We call the attention of our readers to the above, and assure them that the object is a good one; and we think reliance can be placed on the success and permanence of the proposed library. Hence, let all who can, lend it a helping hand.

CUNDURANGO.—This, the latest pretended remedy for the cure of cancer, we have hitherto said nothing about in the *Examiner*. We said nothing because the favorable reports on the subject, including those of Dr. Bliss, of Washington, carried upon their face, or rather in their style of expression, evidence of unreliability. To prevent some of our readers from taking unnecessary trouble to procure the remedy, only to disappoint themselves and their patients, we will say that it has been under careful trial in several cases, under reliable management, and in every instance thus far has entirely failed.

#### CIRCULAR.

ILLINOIS INSTITUTION FOR THE EDUCATION OF FEEBLE-MINDED CHILDREN.—This Institution, which was inaugurated in 1865, as an experimental school for the education of feeble-minded children, has been so successful in training this unfortunate class, that at the last session of the General Assembly it was organized upon an independent basis, and was incorporated as one of the permanent charitable institutions of the

State, thus completing the noble circle of public charities of the Commonwealth of Illinois.

The design and object of the Institution is to furnish the means of education to children and youth of feeble-minds, who are deprived of educational privileges elsewhere, and who are of a proper school attending age. It is designed for those so deficient in intelligence as to be incapable of being educated at common schools, who are not epileptic, insane, or deformed.

The education furnished by the Institution will include, not only the simple elements of instruction usually taught in common schools, where that is practicable, but will embrace a course of training in the more practical matters of every-day life; the cultivation of habits of decency, propriety, self-reliance, and the development and enlargement of a capacity for useful occupation.

The combination which this Institution presents, of practical medical care, and proper physical and mental training, with efficient educational resources, will supply, it is hoped, a want which has long been felt and imperatively demanded by this unfortunate class of children and youth of the State.

The improvement and progress of the pupils have been very encouraging, and parents and friends in almost every instance have expressed satisfaction with what has been accomplished in the short time since the school was organized.

The Institution is open to the inspection of the public at all reasonable hours; and all are not only cordially invited, but are earnestly requested to visit the school.

It is a State Institution, and board and tuition are free during the school year of ten months.

It is the desire of the Trustees to ascertain accurately the number of this unfortunate class of persons in the State, and persons knowing the residence of any in Illinois will confer a favor by reporting the same to the undersigned, as it is desirable that reliable statistics may be gathered in order that proper legislation may be made in their behalf.

Those designing to apply for the admission of pupils should do so at once, as the accommodations are limited.

Applications for admission, information, etc., should be directed to

DR. C. T. WILBUR, SUPERINTENDENT,  
*Jacksonville, Illinois.*

---

THE CHOLERA.—Regarding the cholera in Russia, the St. Petersburg correspondent of the *London Standard* says:

"From the first appearance of the cholera, on the 29th of August, 1870, there have been in St. Petersburg 6,817 cases, and 2,797 deaths. In Moscow and its environs the epidemic is of a very malignant character, and in some of the remote villages, where medical assistance is difficult to obtain, it has committed fearful ravages. Since the 13th of March there have been 3,568 cases in Moscow, and 1,643 deaths. The cholera has appeared in several parts of the government of Viadimir, but the proportion of fatal cases is small. At Cronstadt, up to the 29th of July, there were 439 cases and 211 deaths. At Riga, of 109 cases in two days, 78 were fatal. There have been a few cases at Mittau and also at Kovno, Vitebsk, Polotsk, and Dunaburg. At Wilna, up to the 11th of July, there had been 1,136 cases and 512 deaths. We hear of a great many people having died at Wirbellen, on the Prussian frontier. At Tamboff, a town of about 30,000 inhabitants, 2,504 cases were reported up to the 21st of July, and 1,242 deaths. At Rybinsk, a very important corn depôt on the Volga, more than half the cases have proved fatal; many of the inhabitants have left the town, and business is entirely suspended. At Yaroslaff the proportion of deaths has been large, but the last accounts are more favorable."

---

THE *Independence Belge* to-day discredits the reported disappearance of cholera at Antwerp. At Konigsberg, on Wednesday, there were 127 cases and 48 deaths, and at Dantzic, on the same day, 12 cases and 10 deaths. The epidemic is decreasing in Russia.

---

THE MEDICAL REGISTER AND DIRECTORY OF THE UNITED STATES will shortly be issued by Dr. J. M. Toner, of Washington, and will include the names of 50,000 physicians. It will, moreover, contain statistics relating to all the medical schools, hospitals, medical societies and institutions of the country, and will, in this way, embrace information of value to medical men. *Boston Medical and Surgical Journal*.

---

ONE OF THE HORRORS OF WAR.—The mortality of new-born children in France during the war has been recently calculated by M. Berthillon, and the result is frightful. The author shows that for every 1000 infants under one year of age, there died in the Department of the Marne, 288; in the Department of the Oise, 295; in the Seine-et-Marne, 307; in Seine Inférieure, 318; and in Eure-et-Loire, no less than 370. This terrible

mortality is, undoubtedly, one of the principal causes of the depopulation of France.—*Medical Press and Circular.*

**CALABAR BEAN IN TETANUS.**—Dr. Campbell Black, of Glasgow, has treated a case of tetanus by Calabar bean, and is convinced that the physiological action of that drug places its use in tetanus beyond the pale of empiricism.

---

### BELLEVUE PLACE,

**PRIVATE INSTITUTION, FOR THE CARE AND TREATMENT OF  
INSANE FEMALES.**

Address—

R. J. PATTERSON, M.D.,

BATAVIA, ILL.

---

**RELIABLE VACCINE MATTER CAN BE HAD OF**

DR. S. A. McWILLIAMS,

166 STATE STREET, CHICAGO.

---

## UNIVERSITY OF LOUISVILLE.

### MEDICAL DEPARTMENT,

*Cor. of Eighth and Chestnut Sts.*

### FACULTY.

G. W. BAYLESS, M.D., Professor of the Principles and Practice of Surgery.  
J. M. BODINE, M.D., Professor of Anatomy and Dean of the Faculty.  
LUNSFORD P. YANDELL, JR., M.D., Professor of Materia Medica and Clinical Medicine.

E. R. PALMER, M.D., Professor of Physiology and Histology.

T. S. BELL, M.D., Professor of Science and Practice of Medicine and Public Hygiene.

JOHN E. CROWE, M.D., Professor of Obstetrics and Medical Jurisprudence.

JAMES W. HOLLAND, M.D., Professor of Medical Chemistry and Toxicology.

D. W. YANDELL, M.D., Professor of Clinical Surgery.

T. PARVIN, M.D., Professor of the Medical and Surgical Diseases of Women.

R. O. COWLING, M.D., Adjunct Professor of the Principles and Practice of Surgery, and Demonstrator of Anatomy.

---

### F E E S .

Matriculation Ticket.....	\$ 5.00
Professors' Ticket, in full.....	50.00
Demonstrator's Ticket.....	10.00
Hospital Ticket (required by the city).....	5.00
Graduation.....	30.00

The THIRTY-FIFTH ANNUAL SESSION will commence on the first Monday in October, 1871, and continue until the first of March, 1872.

A PRELIMINARY COURSE OF LECTURES, free to all Students, will commence on the second Monday in September, and continue till the opening of the Regular Term.

For Annual Circular, containing full particulars, address, J. M. BODINE, M.D., DEAN OF THE FACULTY; or E. R. PALMER, SEC'Y OF THE FACULTY.

## MORTALITY FOR THE MONTH OF JULY, 1871.

Accidents, crushed	1	Delirium tremens	3	Measles	12
" from diving	1	Diphtheria	5	" and complications	7
" drowned	16	Dropsy, general	3	Metroperitonitis	1
" by fall	2	" of chest	2	Malformation of head	1
" kerosine	1	Dysentery	33	Old age	8
" carelessness	1	" chronic	1	Paralysis	3
" overdose morphine	1	Empyema	1	Peritonitis	1
" by railroad cars	7	Entero-colitis	10	Phlebitis acute	1
Abcesses, illiac	1	Enteritis	22	Pneumonia	14
" lumbar	1	Erysipelas	3	" broncho	2
Anæmia	1	" of the face	1	" and complications	2
Apthæ	1	Fever, congestive	2	" typhoid	2
Apoplexy	5	" puerperal	5	Polypus nasal	1
Arachnitis	2	" remittent	1	Prostration result of	
Aneurism of aorta	1	" scarlet	6	amputation	1
Births premature	19	" " & complicat's	1	Rheumatism	1
" still born	55	" malignant	2	" inflammatory	1
Brain, congestion of	8	" typhoid	12	Scrofula	3
" softening of	1	Gastromalaxia	1	Small-pox	3
" compression of	1	Gangrenous ulcer of		Spine caries of	1
" inflammation	7	urinary organs	1	Stomach congestion of	1
" obscure disease of	1	Gastritis	5	" hemorrhage of	1
Bronchitis	2	Gastro-enteritis	9	" ulcer of	1
" chronic	1	Heart disease	2	Suicide by shooting	1
" capillary	2	" hypertrophy of	1	" by drowning	3
Cancer of cervical glands	1	" valvular disease of	8	" cutting throat	1
" of stomach	4	Hip-joint, disease of	1	" strychnine	1
Childbirth	2	Hernia, congenital	1	Syphilis	1
Chronic inflamm'n of		Hydrocephalus	18	" hereditary	2
jaw bone	1	Inanition	20	Tabes mesenterica	25
Cholera infantum	316	Icterus	1	Teething	5
" morbus	6	Kidneys, Bright's dis-		" complications	10
Consumption	48	ease of	2	Tumor ovarian	1
Convulsions	105	" disease of	2	Ulcer of chest	1
" puerperal	1	" inflammation of	1	Uterus rupture of	1
Croup	6	Liver, disease of	1	" inflammation of	1
Cyanosis	1	Lungs, congestion of	4	Vesical calculi	1
Cynanche maligna	1	" hemorrhage of	1	Whooping-cough	11
Cystitis	1	" gangrene of	1	" and complications	9
Debility, general	6	Meningitis	14	Unknown	1
Diarrhœa	49	" cerebro-spinal	4		
" chronic	4	" tubercular	3	Total	980
" and complications	8				

## COMPARISON.

Deaths in July, 1871, - 980 | Deaths in July, 1870, -- 1121 | Decrease, ---- 141  
Deaths in June, 1871, ----- 560 | Increase, ----- 420

## AGES.

Under 1	515	20 to 30	46	90 to 100	—
1 to 2	165	30 to 40	38	100 to 101	—
2 to 3	29	40 to 50	32	Unknown	—
3 to 4	22	50 to 60	24		
4 to 5	14	60 to 70	18	Total	980
5 to 10	29	70 to 80	11		
10 to 20	32	80 to 90	5		



Males,-----	529	Single,-----	856	White,-----	973
Females,-----	451	Married,-----	124	Colored,-----	7
Total,-----	980	Total,-----	980	Total,-----	980

## NATIVITY.

Austria,-----		France,-----	3	Poland,-----	1
Bohemia,-----	10	Germany,-----	60	Russia,-----	1
Canada,-----	8	Holland,-----	4	Scotland,-----	2
Chicago, Native,-----	177	Ireland,-----	46	Sweden,-----	8
Chicago, Foreign,-----	531	Italy,-----	0	Wales,-----	2
U. S., other parts,-----	88	Newfoundland,-----	0	Unknown,-----	7
Denmark,-----	6	Norway,-----	14		
England,-----	11	Nova Scotia,-----	1	Total,-----	980

## MORTALITY BY WARDS FOR THE MONTH.

Wards. Mortality. Pop. in 1870. One death in				Mortality.	
1	6	6,531	1089	Accidents	28
2	23	14,338	623	County Hospital	12
3	38	16,805	442	Foundling Home	12
4	28	12,178	435	Home for Friendless	4
5	27	11,605	430	Hospital Alexian Brothers	2
6	63	19,486	309	Lake Hospital	2
7	66	13,849	210	Immigrants	7
8	122	22,994	188	Jewish Hospital	
9	102	27,278	269	Marine Hospital	
10	34	13,750	404	Mercy Hospital	3
11	42	14,988	357	Manslaughter	
12	33	13,976	423	Protestant Orphan Asylum	
13	18	8,943	497	St. Luke's Hospital	1
14	17	9,076	534	St. Joseph Orphan Asylum	3
15	96	20,382	212	Suicide	6
16	34	13,975	411		
17	48	17,118	356		
18	55	17,069	310		
19	30	8,738	291		
20	17	13,628	801		
				Total	980

Mean Thermometer for month, —°; Rain, 0.000 inches; Deaths daily, 31½.

MONEY RECEIPTS FROM JUNE 20, TO JULY 22.—Dr. J. Williams, \$3.00; Dr. J. B. Cory, 3.00; Dr. W. T. Knapp, 1.50; Dr. Paoli, 5.00; Dr. G. Fredighe, 3.00; Dr. S. E. Mitchell, 6.00; Dr. A. C. Buffum, 3.00; Dr. O'Donnell, 3.00; Dr. T. J. Whitten, 3.00; Dr. J. W. Duncan, 3.00; Dr. J. M. Steele, 3.00; Drs. Peck & Moore, 3.00; Dr. J. B. Newman, 3.00; Dr. J. W. Barlow, 3.00; Dr. L. Tibbets, 3.00.

BELLADONNA PLASTER.—Thomas E. Jenkins, M.D. (*Rich. & St. Louis. Med. Jour.*), says that a plaster made from the resinous extract of belladonna root is superior to that made from the spirituous extract of the leaf in the following respects: It adheres closely to the surface, requires no adhesive margins, and neither runs, exudes, nor stains the linen.

# MIAMI MEDICAL COLLEGE OF CINCINNATI.

## ELEVENTH ANNUAL ANNOUNCEMENT.

The next Regular Course of Lectures in this Institution will commence on Tuesday, October 3, 1871.

FEEES.—Professors' Tickets, \$40; Matriculation, \$5; Demonstrator, \$10 (no charge for materiel); Graduation, \$25.

### FACULTY.

GEORGE MENDENHALL, M.D., Professor of Obstetrics.

B. F. RICHARDSON, M.D., Professor of Diseases of Women and Children.

JOHN A. MURPHY, M.D., Professor of Principles and Practice of Medicine and Clinical Medicine.

WM. CLENDENIN, M.D., Professor of Descriptive and Surgical Anatomy.

WM. H. MUSSEY, M.D., Professor of Descriptive, Operative, and Clinical Surgery.

\_\_\_\_\_, Professor of Principles of Surgery and Special Pathology.

E. WILLIAMS, M.D., Professor of Ophthalmology, Aural Surgery, and Clinical Ophthalmology.

EDWARD B. STEVENS, M.D., Professor of Materia Medica and Therapeutics.

WM. H. TAYLOR, M.D., Professor of the Institutes of Medicine.

SIDNEY A. NORTON, M.D., Professor of Chemistry and Toxicology.

J. L. CILLEY, M.D., Demonstrator of Anatomy.

*General Circular now ready:*

GEORGE MENDENHALL, M.D., Dean.

E. B. STEVENS, M.D., Secretary.

# UNIVERSITY OF LOUISIANA,

MEDICAL DEPARTMENT,

NEW ORLEANS.

### FACULTY.

A. H. CENAS, M.D., Emeritus Professor of Obstetrics.

JAMES JONES, M.D., Professor of Obstetrics.

WARREN STONE, M.D., Professor of Surgery.

T. G. RICHARDSON, M.D., Professor of Anatomy.

SAMUEL M. BEMISS, M.D., Professor of Medicine.

STANFORD E. CHAILLE, M.D., Professor of Physiology.

FRANK HAWTHORN, M.D., Professor of Materia Medica.

JOSEPH JONES, M.D., (late of the University of Nashville,) Professor of Chemistry.

C. J. BICKHAM, M.D., Demonstrator of Anatomy.

The annual course of instruction in this department will commence on Monday, the 13th of November, 1871, and terminate on the second Saturday of March, 1872. Preliminary lectures on Clinical Medicine and Surgery will be delivered in the amphitheatre of the Charity Hospital, beginning on the 18th of October, without any charge to students. The Anatomical rooms will be opened at the same time.

The members of the Faculty are Visiting Physicians and Surgeons to the Charity Hospital, and give instructions daily at the bedside of the sick. The practical advantages thus offered to students are unrivaled.

FEEES.—For all the Lectures, \$140; Matriculation, \$5; Practical Anatomy, \$10; Graduation, \$30. Payment required in advance.

For further information, address

T. G. RICHARDSON, M.D., Dean.

1871.

THREE

1871.

# STANDARD PUBLICATIONS

## AT A LOW PRICE!

NEEDED BY EVERY PHYSICIAN.

### I. THE MEDICAL AND SURGICAL REPORTER. PUBLISHED WEEKLY.

LONG ESTABLISHED. WIDELY CIRCULATED. AMERICAN. POPULAR.

*The Reporter is no Experiment. Its Twenty-fifth  
Volume begins with July, 1871.*

Twenty large octavo pages of reading matter a week; Lectures, Original Communications, Hospital and Medical Society Reports, Periscope, Notes on Books, Editorials, Notes and Comments, Correspondence, News and Miscellany, Queries and Replies, etc. Two volumes a year of over 500 pages each. Good paper—good print—good reading. The most widely circulated, popular, and generally read Medical Journal in America.

It is the vehicle through which Country Physicians especially, communicate with the Profession.

Subscription price, \$5 per annum, in advance.

Those desiring to test the merits and claims of the REPORTER, can have it on trial for Three Months for \$1.

### II. The Half-Yearly Compendium of Medical Science.

Published January and July. Over 300 pages in each number. Good paper—good type. The most complete abstract of the medical journalism of the world published in the English language. None other does justice to American medical literature. Its fourth year began January, 1871, and it is the most successful medical enterprise thus far ever started in this country. Subscription price, \$5 per annum, including postage. SEND FOR A CIRCULAR.

### III. The Physician's Daily Pocket Record.

Admitted to be the best Physicians' Visiting List and Pocket Manual published. It contains many new features, among which are: A List of New Remedies; Doses of Medicines by Inhalation, Hypodermic Injection, Suppositories, etc.; Classified List of Medicines, with doses and prices; Tables for Examination of Urine, etc.; Fee Bills, etc.

It is PERPETUAL, being good for a year from date of purchase. A Patent Self-closing Clasp, or the Ordinary Tuck, at the option of the purchaser. This work is growing in popularity—its sale increasing rapidly.

Price:—35 patients a week, \$1.50; 70 patients, \$2.00; including postage, and name stamped on clasp or tuck, when requested.

N.B.—When two or more of the above publications are taken together, directly from this office, they are offered at the following

#### COMMUTATION RATES:

Reporter and Compendium, - - - - -	\$7 00
Reporter and Pocket Record, - - - - -	6 00
Reporter, Compendium and Pocket Record, - - - - -	8 00
Compendium and Pocket Record, - - - - -	4 00

Payable invariably in advance, at this office.

Liberal inducements offered to those who interest themselves in extending the circulation of the publications of this office.

Address—

**S. W. BUTLER, M.D.,**

115 SOUTH SEVENTH STREET, PHILADELPHIA, PA.

Letters of Inquiry must enclose stamps for a reply.



**Office of J. E. GARDINER'S**  
**GOVERNMENT ARTIFICIAL LIMB MANUFACTORY,**  
**CHICAGO, ILL.**  
 BRANCH OFFICE - MILWAUKEE, WIS.  
*Send for Pamphlet.*

## **WOMAN'S HOSPITAL MEDICAL COLLEGE** **OF CHICAGO.**

**SESSION OF 1871-72.**

### **FACULTY.**

**W. H. BYFORD, M.D.,** Pres't of Faculty, 62 State Street, Professor of Clinical Surgery of Women.

**W. G. DYAS, M.D.,** 90 Washington St., Professor of Theory and Practice of Medicine.

**A. FISHER, M.D.,** 59 Clark Street, Professor Emeritus of Surgery.

**BOSWELL G. BOGUE, M.D.,** Treas. of Faculty, 9 Washington Place, Professor of Surgery.

**T. D. FITCH, M.D.,** Sec'y of Faculty, 296 West Monroe St., Professor of Diseases of Women.

**E. MARGUERAT, M.D.,** 132 Dearborn Street, Professor of Obstetrics.

**CHAS. G. SMITH, M.D.,** 169 Dearborn Street, Professor of Diseases of Children.

**S. C. BLAKE, M.D.,** 876 Prairie Avenue, Professor of Diseases of the Mind and Nervous System.

**MARY H. THOMPSON, M.D.,** 402 North State Street, Professor of Hygiene and Clinical Obstetrics and Diseases of Women.

**G. C. PAOLI, M.D.,** Room 11, Ewing's Block, Professor of Materia Medica and Therapeutics.

**S. A. McWILLIAMS, M.D.,** 166 State Street, Professor of Anatomy.

**CHAS. W. EARLE, M.D.,** 62 State Street, Professor of Physiology.

**NORMAN BRIDGE, M.D.,** 229 West Madison street, Professor of Pathology.

**A. H. FOSTER, M.D.,** 229 West Madison Street, Professor of Surgical Anatomy and Operations in Surgery.

**M. DELAFONTAINE, M.D.,** 144 Madison Street, Professor of Chemistry.

**SAMUEL COLE, M.D.,** 303 Wabash Avenue, Professor of Ophthalmic and Aural Surgery.

**P. S. MACDONALD, M.D.,** 349 S. Clark Street, Demonstrator of Anatomy.

The regular Annual Lecture Term in this Institution, will commence on the first Tuesday in October, and continue twenty weeks.

**FEEES.**—Lectures, \$50.00; Matriculation, \$5.00; Dissection, \$5.00; Cook County Hospital, \$5.00; Graduation, \$20.00; Women's Hospital free.

Clinical advantages are abundant.

For announcement, or any information in regard to the College, address the Secretary

**T. D. FITCH, M.D.,** 296 W. Monroe St., Chicago.

# BELLEVUE HOSPITAL MEDICAL COLLEGE.

CITY OF NEW YORK.

SESSIONS OF 1871-'72.

THE COLLEGIATE YEAR in this Institution embraces a Preliminary Autumnal Term, the Regular Winter Session, and a Summer Session.

THE PRELIMINARY AUTUMNAL TERM for 1871-72 will commence on Wednesday, Sept. 13, 1871, and continue until the opening of the Regular Session. During this term, instruction consisting of didactic lectures on special subjects and daily clinical lectures, will be given, as heretofore, by the members of the Faculty. Students desiring to attend the Regular Session are strongly recommended to attend the Preliminary Term, but attendance during the latter is not required. *During the Preliminary Term clinical and didactic lectures will be given in precisely the same number and order as in the Regular Session.*

THE REGULAR SESSION will commence on Wednesday, October 11th, and end about the 1st of March, 1872.

## FACULTY.

ISAAC E. TAYLOR, M.D.,

Emeritus Prof. of Obstetrics and Diseases of Women and Children, and President of the College.

JAMES R. WOOD, M.D., LL.D.,

Emeritus Prof. of Surgery.

FORDYCE BARKER, M.D.,

Prof. of Clinical Midwifery and Diseases of Women.

FRANK H. HAMILTON, M.D., LL.D.

Prof. of Practice of Surgery with Operations and Clinical Surgery.

LEWIS A. SAYRE, M.D.,

Prof. of Orthopedic Surgery and Clinical Surgery.

ALEXANDER B. MOTT, M.D.,

Prof. of Surgical Anatomy with Operations and Clinical Surgery.

W. H. VAN BUREN, M.D.,

Prof. of Principles of Surgery with Diseases of the Genito-Urinary System and Clinical Surgery.

BENJAMIN W. MCCREADY, M.D.,

Prof. of Materia Medica and Therapeutics and Clinical Medicine.

AUSTIN FLINT, JR., M.D.,

Prof. of Physiology and Microscopy, and Secretary of the Faculty.

STEPHEN SMITH, M.D.,

Prof. of Descriptive Anatomy and Clinical Surgery.

AUSTIN FLINT, M.D.,

Prof. of Principles and Practice of Medicine and Clinical Medicine.

R. OGDEN DOREMUS, M.D.,

Prof. of Chemistry and Toxicology.

WILLIAM A. HAMMOND, M.D.,

Prof. of Diseases of the Mind and Nervous System and Clinical Medicine.

WILLIAM T. LUSK, M.D.,

Prof. of Obstetrics, Diseases of Women, Diseases of Infancy, and Clinical Midwifery.

## SPECIAL LECTURES IN THE REGULAR TERM.

OPHTHALMOLOGY—By PROF. HENRY D. NOYES, M.D.

DISEASES OF THE SKIN—By EDWARD L. KEYES, M.D.

A distinctive feature of the method of instruction in this College is the union of clinical and didactic teaching. All the lectures are given within the Hospital grounds. During the Regular Winter Session, in addition to four didactic lectures on every week-day, except Saturday, two or three hours are daily allotted to clinical instruction. The union of clinical and didactic teaching will also be carried out in the Summer Session, nearly all of the teachers in this Faculty being physicians and surgeons in the Bellevue Hospital and the great Charity Hospital on Blackwell's Island.

The Summer Session will consist of two Recitation Terms; the first, from March 15th to July 1st, and the second, from September 1st to the opening of the Regular Session. During this Session there will be daily recitations in all the departments held by a corps of examiners appointed by the regular Faculty. Regular clinics will also be held daily.

## FEES FOR THE REGULAR SESSION.

Fees for Tickets to all the Lectures during the Preliminary and Regular Term, including Clinical Lectures, - - - - -	\$140 00
Matriculation Fee, - - - - -	5 00
Demonstrator's Ticket (including material for dissection), - - - - -	10 00
Graduation Fee, - - - - -	30 00

## FEES FOR THE SUMMER SESSION.

Matriculation (Ticket good for the following Winter), - - - - -	\$ 5 00
Recitations and Clinics, - - - - -	35 00
Chemical Laboratory (including material), - - - - -	25 00
Dissection (Ticket good for the following Winter), - - - - -	10 00

For the Annual Circular and Catalogue, giving regulations for graduation and other information, address the Sec'y of the College, PROF. AUSTIN FLINT, JR., Bellevue Hos. Med. Col.

August, 1871.

## NEW WORKS

JUST PUBLISHED AND IN PREPARATION

BY

LINDSAY & BLAKISTON,

*Medical Publishers and Booksellers,*

No. 25 SOUTH SIXTH STREET, PHILADELPHIA.

### *Meadows' Manual of Midwifery.*

Including the Signs and Symptoms of Pregnancy, Obstetric Operations, Diseases of the Puerperal State, &c., &c. By ALFRED MEADOWS, M.D., Member of the Royal College of Physicians, &c., &c. First American from the Second London Edition, with numerous Illustrations. . Price, \$3.00

"Those who read the first edition of this work will bear us out in thinking that Dr. Meadows's Manual forms one of the most convenient, practical, and concise books yet published on the subject. It was especially good as a student's manual, and the author has, in his second edition, sought to make it of equal value to the practitioner. The part which treats of obstetric operations has been well revised, and has received numerous additions, and the several chapters on Unnatural and Complex Labors likewise comprise much new matter. Upwards of ninety new engravings have been inserted in this edition, and, with a view to facilitate reference, the author has furnished it with a very full and complete table of contents and index. We can cordially recommend this manual as accurate and practical, and as containing in a small compass a large amount of the kind of information suitable alike to the student and practitioner."—*London Lancet*, May 6, 1871.

"This new edition of a book which was at once recognized as a good manual, is a considerable improvement on its predecessor. It is eminently a book which will teach the student. . . . Not merely is the practical treatment of Labor and also of the Diseases and Accidents of Pregnancy well and clearly taught, but the anatomical machinery of parturition is more effectively explained than in any other treatise that we remember; and besides this, the book is honorably distinguished among manuals of Midwifery by the fulness with which it goes into the subject of the structure and development of the ovum. Dr. Meadows has done good service in giving a clear account of this subject in a very short space, yet with sufficient fulness. On all questions of treatment, whether by medicines, by hygienic regimen, or by mechanical or operative appliances, this treatise is as satisfactory as a work of manual size could be; and altogether, students and practitioners can hardly do better than to adopt it as their vade mecum."—*The Practitioner*.

### *Dillnberger's Handy-Book of the Treatment of*

Women and Children's Diseases, according to the Vienna Medical School.

Part I. The Diseases of Women.

Part II. The Diseases of Children.

Translated from the Second German Edition, by P. NICOL, M.D. One volume 12mo. . . . . Price, \$1.75

"We noticed favorably the original of this handbook some months ago, and suggested that an English translation of it, with notes showing the main points wherein the practice of our medical schools differs from that at Vienna, might be well received. Mr. Nicol has now carried out this idea, and we imagine that many practitioners will be glad to possess this little manual, which gives a large mass of practical hints respecting the treatment of diseases which probably make up the larger half of every-day practice. The translation is well and correctly performed, and the necessary explanations of references to German medicinal preparations are given with proper fulness."—

*The Practitioner.*



## *Tilt's Change of Life in Health and Disease.*

A Practical Treatise on the Nervous and other Affections incidental to Women at the Decline of Life. By EDWARD JOHN TILT, M.D. From the Third London Edition. In one volume Octavo. . . Price, \$3.00

"The work is rich in personal experience and observation as well as in ready and sensible reflection on the experience and observation of others. The book is one that no practitioner should be without, as the best we have on a class of diseases that makes a constant demand upon our care, and requires very judicious management on the part of the practitioner."—*London Lancet*.

"The great abilities of Dr. Tilt, his extensive knowledge and his literary power, are well shown in this book, and we are pleased to say that it has substantial and peculiar merits. It contains many sage, practical recommendations, and will amply repay perusal."—*Edinburgh Medical Journal*.

"Dr. Tilt has been a very earnest and a very faithful worker in the physiology and diseases of women, and has made contributions to the literature of the subject which are all of accepted value."—*British Medical Journal*.

## *Byford on the Uterus.* SECOND EDITION.

On the Chronic Inflammation and Displacements of the Unimpregnated Uterus. A New, Enlarged, and thoroughly Revised Edition, with numerous Illustrations. One volume Octavo. . . . . Price, \$3.00

"Six years have elapsed since the first edition of Dr. Byford's work, which was received with signal favor by the profession of the country, appeared. During that time the author has not been idle, but with much judgment and labor has collected from his own experience and that of others many facts to enrich the present edition of his monograph. On the present subject it is the best, in our opinion, from the pen of any American."—*Med. and Surg. Reporter*.

"The first edition of this work was favorably received by the profession. Advances made since that time in the department to which it refers have not been overlooked by the author in preparing the present edition. He appears to have examined carefully into the labors of the numerous able men who have lately written on the subject, and to have condensed the results, together with those of his own extensive experience, in a volume which must prove highly useful to the medical student."—*Pacific Med. and Surg. Journal*.

"It is a sensible, practical work, and cannot fail to be read with interest and profit."—

*Boston Med. and Surg. Journal.*

"This is a carefully written, practical monograph, in every chapter of which may be seen evidence that the author has not only a theoretical but also a practical familiarity with the subject upon which he writes. It constitutes one of the most plain, practical, and valuable works upon this department of practical medicine, and we must earnestly recommend all our readers to supply themselves with it."—*Buffalo Med. and Surg. Journal*.

"We have been looking for this work with much interest, and are not disappointed in finding so complete a work. We have read it with much benefit and pleasure. The excellency of the treatise is seen in the fulness and accuracy of each chapter, while the familiarity of the author with his subject is apparent in his many practical suggestions."—*St. Louis Med. and Surg. Journal*.

"One of the special excellencies of the book is its individuality. It gives very fairly a systematic account of the nature, cause, and plans of treatment of the diseases embraced in his field of observation; his personal experience is for the most part presented to you. There is, of course, a freshness in this style of book-making that is always acceptable to the practitioner."—

*Cincinnati Lancet and Observer.*

## *Byford on Women.* SECOND EDITION.

The Practice of Medicine and Surgery applied to the Diseases and Accidents incidental to Women. By W. H. BYFORD, A.M., M.D., Professor of Obstetrics and Diseases of Women and Children in the Chicago Medical College, &c. Second Edition, Revised and Enlarged, with additional Illustrations. . . . . Price, \$5.00

The rapid sale of the first edition of this book, which was exhausted in a little more than a year, has enabled the author to carefully revise the whole work, add many improvements, and to make a large addition of new matter, without, however, materially increasing the size of the volume.

"This work treats well-nigh all the diseases incident to women, diseases and accidents of the vulva and perineum, stone in the bladder, inflammation of the vagina, menstruation and its disorders, the uterus and its ailments, ovarian tumors, diseases of the mammae, puerperal convulsions, phlegmasia alba dolens, puerperal fever, &c. Its scope is thus of the most extended character, yet the observations are concise, but convey much practical information."—*London Lancet*.

## *Tanner and Meadows' Practical Treatise on the*

Diseases of Infancy and Childhood. By THOMAS HAWKES TANNER, M.D.

The Third American from the last London Edition, by ALFRED MEADOWS,

M.D., author of "A Manual of Midwifery," &c., &c. One vol. \$3.50

"This much enlarged and improved edition of Dr. Tanner's useful manual on children's diseases will be very acceptable to the profession. It is of a thoroughly practical character, and to the medical man engaged in active practice among all classes of patients it will be found very useful. One of the special features which entitle it to praise on this ground is the copious list of formulas. Dr. Tanner's books have always been distinguished by attention to this matter, but in the present case Dr. Meadows has very much extended and enriched the collection; we very especially mention the care and accuracy with which he has drawn out prescriptions of the proper doses of narcotics at various ages, a point in which there is an extraordinary and unaccountable carelessness of statement in the majority of practical works. We wish this volume success, which it merits not only by the intrinsic excellence of its contents, but by its elegant and readable style of printing and its not too extensive bulk."—*The Practitioner*, May, 1870.

"We have carefully perused the second edition of Dr. Tanner's work. The author has been singularly fortunate in having secured the aid of Dr. Meadows in its production. Our review of the former edition was laudatory, and our meed of praise is still more deserving now. The work has been considerably enlarged and its general plan entirely changed, and by this a great improvement has been effected. An extremely valuable portion of the book is the Appendix of Formulae, a branch of the subject in which Dr. Meadows, by previous works, has shown himself particularly qualified. Few things are more important than the possession of good working combinations of medicines; and on this account, as on most others, the book will not only be read with advantage, but will also be an invaluable work of frequent reference to the practitioner."—*London Lancet*, August 20, 1870.

"This book of Dr. Tanner's has been much enlarged and the plan altered by Dr. Meadows. As it now stands it is probably one of the most complete in our language. It no longer deals with children's diseases only, but includes the peculiar conditions of childhood, both normal and abnormal, as well as the therapeutics specially applicable to that class of patients. The articles on Skin Diseases have been revised by Dr. Tilbury Fox, and those on Diseases of the Eye by Dr. Brudenell Carter, both gentlemen distinguished in these specialties."—*Medical Times and Gazette*.

## *Duchenne's Localized Electrization.*

Translated from the Third Edition, by HERBERT TIBBITS, M.D., L.R.C.P.

Lond., Medical Superintendent of the National Hospital for the Paralyzed and Epileptic. With 92 Illustrations, and Notes and Additions by the

Translator. . . . . Price, \$3.00

### CONTENTS OF PART I.

CHAPTER II. LOCALIZED ELECTRIZATION.—Part 1. The Fundamental Principles of the Method. Part 2. Localized Muscular Electrization. Part 3. Cutaneous Electrization. Part 4. Faradization of Internal Organs, the Genital Organs, and Organs of Sense. Part 5. The General Effects of Localized Faradization.

CHAPTER III. HISTORICAL AND CRITICAL OBSERVATIONS UPON THE PRINCIPAL METHODS OF ELECTRIZATION.—Part 1. On the Value of Electro-puncture as applied to the Treatment of Paralysis. Part 2. On the Value of Electrization by Reflex Action as applied to the Treatment of Paralysis. Part 3. On the Therapeutic Value of Localized Faradization.

CHAPTER IV. ELECTRO-MEDICAL INSTRUMENTS WITH REGARD TO THEIR APPLICATION IN PATHOLOGY, IN PHYSIOLOGY, AND IN THERAPEUTICS.—Part I. The Properties which Instruments should possess. Part 2. The author's large double-current Volta-Faradic Instrument. Part 3. Small double-current Volta-Faradic Instrument. Part 4. The author's double-current Magneto-Faradic Instrument. Part 5. Historical and Descriptive Account of Inductive Instruments.

This part of Duchenne's great work is a translation from the third edition now being prepared by the author, and contains all that has yet been printed, and is published even before the original is issued. It is not only a well-nigh exhaustive treatise on the medical uses of Electricity, but it is also an elaborate exposition of the different diseases in which Electricity has proved to be of value as a therapeutic and diagnostic agent. No similar treatise it is believed exists in the English language.

PART II, illustrated by chromo-lithographs and numerous wood-cuts, is preparing.

"Duchenne's great work has for years held its place as the most complete; and Dr. Tibbits, by presenting us with an English version of the forthcoming third edition, has earned the gratitude of the profession. His experience at the National Hospital gives great value to his notes and additions, and we are happy to congratulate him upon having so far accomplished an undertaking of great utility."—*The Lancet*.

### *Cazeaux's Great Work on Obstetrics.* 5TH EDITION.

A Theoretical and Practical Treatise on Midwifery, including the Diseases of Pregnancy and Parturition. Fifth American, translated from the Seventh French Edition. Revised and Annotated by S. TARNIER, Adjunct Professor in the Faculty of Medicine of Paris. Greatly enlarged and improved. Over 1100 royal octavo pages, with numerous Lithographic and other Illustrations on Wood. Price, bound in cloth, bevelled boards, \$6.50  
" " leather, . . . . 7.50

### *Harris' Principles and Practice of Dentistry.*

The Tenth Revised Edition, in great part rewritten, rearranged, and with many new and important Illustrations; including

1. Dental Anatomy and Physiology.
2. Dental Pathology and Therapeutics.
3. Dental Surgery.
4. Dental Mechanics.

By CHAPIN A. HARRIS, M.D., D.D.S., &c. The Tenth Edition, revised and edited by P. H. AUSTEN, M.D., Professor of Dental Science and Mechanism in the Baltimore College of Dental Surgery, assisted by Prof. GORGAS and THOS. S. LATIMER, M.D. With nearly 400 Illustrations, including many new ones made especially for this edition.

One volume Royal Octavo, bound in Cloth, . . . . \$6.50  
" " " Leather, . . . . 7.50

The subscribers, in presenting to the *Dental Profession* the tenth revised edition of the late Prof. Harris' Text-Book of Dentistry, desire to call their attention to the thorough revision and modification in its arrangement which it has been found necessary to make, in order to bring it fully up to the present advanced state of the science, and to preserve for it that reputation which it has for so many years sustained, as being the first and leading book on the subject in the English language.

### *Pereira's Physician's Prescription Book.*

A New American from the Fifteenth London Edition. Containing Lists of Terms, Phrases, Contractions and Abbreviations used in Prescriptions, with Explanatory Notes, the Grammatical Construction of Prescriptions, Rules for the Pronunciation of Pharmaceutical Terms, a Prosodical Vocabulary of the Names of Drugs, &c. By JONATHAN PEREIRA, M.D., F.R.S., &c. . . . . Price, in cloth, . . . . \$1.25  
" in leather, with tucks and pocket, 1.50

### *Beale's Life Theories.*

Their Influence upon Religious Thought. By LIONEL S. BEALE, M.D., F.R.S., author of "Protoplasm," &c. With colored plates. Price, \$2.25

### *Wright on Headaches.* A NEW EDITION.

Their Causes and Their Cure. By HENRY G. WRIGHT, M.D., Member of the Royal College of Physicians, &c., &c. From the Fourth London Edition. . . . . Price, \$1.25

"The author's plan is simple and practical. He treats of headaches in childhood and youth, in adult life and old age, giving in each their varieties and symptoms, and their causes and treatment. It is a most satisfactory monograph, as the mere fact that this is a reprint of the *fourth* edition testifies."—*Med. and Surg. Reporter.*

## *Rindfleisch's, Text-Book of Pathological Histology.*

An Introduction to the Study of Pathological Anatomy. By Dr. EDWARD RINDFLEISCH, O. O. Professor of Pathological Anatomy in Bonn. Translated from the Second German Edition, by WM. C. KLOMAN, M.D., assisted by F. T. MILES, M.D., Professor of Anatomy, University of Maryland. 208 Illustrations. One volume Octavo. In October.

## *Mackenzie on Laryngeal Growths.*

Growths in the Larynx, with Reports and an Analysis of 100 Consecutive Cases treated by the author, and a tabular statement of every published case treated since the invention of the Laryngoscope. By MORELL MACKENZIE, M.D., author of "The Laryngoscope," "Diseases of the Throat," &c. Profusely illustrated by wood engravings and chromo-lithographs. One volume Octavo.. . . . Price, \$3.00

## *Acton's Functions and Disorders of the Reproductive*

Organs in Childhood, Youth, and Advanced Life. By WILLIAM ACTON, M.D. Third American from the Fifth London Edition. Octavo. \$3.00

"We think Mr. Acton has done good service to society by grappling manfully with sexual vice, and we trust that others whose position as men of science and teachers enable them to speak with authority will assist in combating and arresting the evils which it entails. We are of the opinion that the spirit which pervades it is one that does credit equally to the head and to the heart of the author."—*The British and Foreign Medico-Chirurgical Review.*

## *Wedl's Dental Pathology.*

By Prof. WEDL, of the University of Vienna. First American Edition, by FRANCIS H. BROWN, M.D., with Notes by THOMAS B. HITCHCOCK, M.D., Professor of Dental Pathology and Therapeutics in the Dental School of Harvard University, Cambridge. With numerous Illustrations. In October.

## *Waring's Manual of Practical Therapeutics.*


Considered chiefly with reference to Articles of the Materia Medica. By EDWARD JOHN WARING, F.R.C.S., F.L.S., &c., &c. Second American from the Third London Edition. Royal Octavo. Price, in cloth, \$5.00  
" in leather, 6.00

## *Gant's Science and Practice of Surgery.*

A Complete System and Text-Book of Surgery, including both the Principles and Practice. Illustrated by about 250 Engravings. By FREDERICK J. GANT, F.R.C.S., &c., &c. In one volume Octavo. In October.

## *Trousseau's Lectures on Clinical Medicine.* Vol. IV.

Translated and Edited under the auspices of the New Sydenham Society, and published in conjunction with them. In September.

 LINDSAY & BLAKISTON'S complete Descriptive Catalogue of their Publications, together with a classified and priced list of all recent Medical Books, American and English, furnished or mailed free on application.

# Meigs and Pepper on Children.

FOURTH EDITION, ENLARGED AND IMPROVED.

The publishers have selected the following notice, from a late number of the LONDON LANCET, of the New Edition of this work, as indicating, perhaps, more fully than any other of the numerous favorable criticisms that have appeared of it elsewhere, its great value to the *Practitioner and Student of Medicine*.

"It is not necessary to say much, in the way of criticism, of a work so well known as Meigs on Diseases of Children, especially when it has reached a fourth edition. Our duty is wellnigh restricted to the point of ascertaining how far, under an old color, it preserves the freshness and the value of a new book — how far it incorporates what is new with what is old without unseemly marks of mere joining. There is some advantage in starting entirely afresh, in being merely clinical, or in being very short, and limiting one's self to the expression of one's own views and experience. But such is not the nature of this book, and the advantages of it are different. It is a work of more than 900 good American pages, and is more encyclopædial than clinical. But it is clinical, and withal most effectually brought up to the light, pathological and therapeutical, of the present day.

"The book is like so many other good American medical books which we have lately had occasion to notice; it marvellously combines a *résumé* of all the best European literature and practice with evidence throughout of good personal judgment, knowledge, and experience. It is gratifying to see how our English authors are quoted, and especially how the labors of Hillier, who died so prematurely, are recognized. But the book abounds in exposition of American experience and observation in all that relates to the diseases of children. Not the least interesting additions to the volume are several extensive tables, exhibiting the mortality in Philadelphia of some of the most common and fatal diseases in connection with the variations of the temperature, and prepared with great care from the records of the Board of Health.

"The thoroughly fresh nature of the book is especially seen in the care with which certain articles have been written. Such are those on Rickets and Tuberculosis, Infantile Atrophic Paralysis, and Progressive Paralysis. No book now on diseases of children is complete which does not treat specially of constitutional or diathetic diseases, such as rickets and tuberculosis, syphilis, &c.

"Among other articles of great interest and value we would mention those on Diseases of the Cæcum and Appendix Vermiformis, on Indigestion in Children, on Diarrhœa, on Entero-Colitis, on Intussusception, on Chronic Hydrocephalus, and on Croup and the value of Tracheotomy.

"The difficulties of editing a new edition of a medical book of some standing are not more felt in the region of pathology and the classification of disease than in that of therapeutics. In this work this difficulty has been fairly faced by the authors. They have to confess to having changed their practice very materially in the treatment of acute diseases, to having given up mercury in most inflammatory diseases, and almost given up bloodletting. We recommend the views of these authors as to the injurious effects of calomel and antimony to careful consideration. They do not entirely abjure the use of bloodletting in certain cases of pneumonia and meningitis. Indeed, we think they will find reason in future editions to talk a little less freely than they do about bleeding and cupping very young children in certain circumstances of pneumonia, and in certain cases of simple meningitis. With a few exceptions of this kind, the therapeutics are sound and commendable, great importance being given to proper feeding and the general management of infancy and childhood. It is due to authors of so much fairness and experience to publish widely their opinion of the injurious and depressing effects of antimony in the inflammations of children. To infants under two years of age they think it best to give no antimony even in pneumonia. They do not use tartar emetic at all in the cases of children, but small doses, such as the twelfth of a grain, of the precipitated sulphuret of antimony, every two, three, or four hours, watching its effects, and withdrawing it quickly if symptoms of prostration appear, perhaps without any vomiting.

"We are glad to add this work to our library. There are few diseases of children which it does not treat of fully and wisely in the light of the latest physiological, pathological, and therapeutical science." — *London Lancet*, July 23, 1870.

Price, handsomely bound in Cloth . . . . .	\$6 00
" " " Leather . . . . .	7 00

LINDSAY & BLAKISTON, PUBLISHERS,  
PHILADELPHIA.



"The leading feature of this book is its essentially practical character."—  
LONDON LANCET.

## Tanner's Practice of Medicine.

FIFTH AMERICAN, FROM THE SIXTH LONDON EDITION

ENLARGED AND THOROUGHLY REVISED.

JUST READY.

*THE PRACTICE OF MEDICINE*, by THOMAS HAWKES TANNER, M.D., *Fellow of the Royal College of Physicians, Author of Tanner's Practical Treatise on the Diseases of Children, &c., &c. Fifth American Edition, with a very large Collection of Formulæ. One Volume, Royal Octavo, containing over 1100 pages.*

Price, handsomely bound in Cloth, . . \$6 00

" " " Leather, . . 7 00

### CONTENTS.

#### Part 1. General Diseases.

- " 2. Fevers.
- " 3. Venereal Diseases.
- " 4. Diseases of the Nervous System.
- " 5. Diseases of the Organs of Respiration and Circulation.
- " 6. Diseases of the Thoracic Walls.
- " 7. Diseases of the Alimentary Canal.
- " 8. Diseases of the Liver.
- " 9. Diseases of the Pancreas and Spleen.

#### Part 10. Diseases of the Abdominal Walls.

- " 11. Diseases of the Urinary Organs.
- " 12. Diseases of the Uterine Organs.
- " 13. Diseases of the Skin.
- " 14. Diseases of Cutaneous Appendages.
- " 15. Diseases of the Bloodvessels.
- " 16. Diseases of the Absorbent System.
- Appendix of Formulæ
- General Index.

"The rapidity with which edition after edition of this work has appeared and disappeared is, on the whole, a true test of its merits. The fifth edition was, we believe, a very large one, yet the book was for some time out of print before the present one could be prepared. Dr. Tanner has chosen his title well; his work is essentially one on the practice of medicine in its widest sense, and it is in what relates to pure practice, as contradistinguished from the theory of medicine, that the book is strongest; for it has been the author's aim to collect everything he could think of which would aid the practitioner in the discharge of his duties. But it is not to men engaged in the active discharge of the duties of their profession alone to whom the book is welcome. With the student, preparing himself to enter upon these duties, the book has long been a favorite, chiefly, we believe, from the lucidity of its style and the character of its substance. Other books there are, more eloquent and more recondite, but none excel Dr. Tanner's work in these important features. All that is necessary to know is here, disposed in such a manner as to admit of the readiest reference, and of being most easily retained in the memory. Our limits will not admit of an extended review, which would be out of place with regard to a book practically established as a standard. It carries its own recommendation, and is its own best passport to general use. It has been the result of very great labor—labor well spent; and it appears in a form which is creditable to its publishers as it is pleasing to those who have to use the book.—

*British and Foreign Medico-Chirurgical Review, April, 1870.*

"Dr. Tanner's works are all essentially and thoroughly practical,—he never for one moment allows this utilitarian end to escape his mental view. He aims at teaching how to recognize and how to cure disease, and in this he is thoroughly successful. It is indeed a wonderful mine of knowledge."—*Medical Times and Gazette, July, 1869.*



# PRICES REDUCED OF LINDSAY & BLAKISTON'S PHYSICIAN'S VISITING LIST.

NOW READY FOR 1872.

"The simplest of all the VISITING LISTS published, it must continue to hold, what it now has, the preference over all other forms of this indispensable companion for the Physician."—*New York Med. Journal.*

## CONTENTS.

- |   |   |
|---|---|
| 1. Table of Signs, or Guide for Registering Visits, Engagements, &c.<br>2. An Almanac<br>3. Marshall Hall's Ready Method in Asphyxia.<br>4. Poisons and their Antidotes.<br>5. Table for Calculating the Period of Utero-Gestation.<br>6. The Visiting List arranged for 25, 50, 75, or 100 Patients. | 7. Memoranda pages for every month in the year.<br>8. Pages for Addresses of Patients, &c.<br>9. " Bills and Accounts asked for and delivered.<br>10. " Obstetric Engagements.<br>11. " Vaccination.<br>12. " Recording Obstetric Cases, Deaths, and for General Memoranda. |
|---|---|

## SIZES AND PRICE.

For 25 Patients weekly.	Tucks, pockets, and pencil,				\$1 00
50 " "	" "	" "	" "	" "	1 25
75 " "	" "	" "	" "	" "	1 50
100 " "	" "	" "	" "	" "	2 00
50 " "	" 2 vols. {	Jan. to June. }	" "	" "	2 50
		July to Dec. }	" "	" "	
100 " "	" 2 vols. {	Jan. to June. }	" "	" "	3 00
		July to Dec. }	" "	" "	

## Also, AN INTERLEAVED EDITION,

for the use of *Country Physicians* and others who compound their own Prescriptions, or furnish *Medicines* to their patients. The additional pages can also be used for *Special Memoranda*, recording important cases, &c., &c.

For 25 Patients weekly, interleaved, tucks, pockets, etc.,				\$1 50
50 " "	" "	" "	" "	1 75
50 " "	" 2 vols {	Jan. to June. }	" "	3 00
		July to Dec. }	" "	

This VISITING LIST has now been published for *Twenty Years*, and has met with such uniform and hearty approval from the Profession, that the demand for it has steadily increased from year to year.

The Publishers, in order to still further extend its circulation and usefulness, and to keep up the reputation which it has so long retained, of being

## THE CHEAPEST AND BEST,

as well as the OLDEST VISITING LIST published, have now made a very considerable reduction in the price.

It can be procured from the principal booksellers in any of the large cities of the United States and Canada, or copies will be forwarded by mail, free of postage, by the Publishers, upon receipt by them of the retail price as annexed.

In ordering the work from other booksellers, order

*Lindsay & Blakiston's Physician's Visiting List.*

And in all cases, whether ordering from the Publishers or otherwise, specify the size, style, &c., wanted.

**LINDSAY & BLAKISTON, Publishers.**  
25 South Sixth St., Philadelphia.

ST.

what it  
for the

year.

and de

he, and

\$1 00

1 25

1 50

2 00

2 50

3 00

ptions.

Special

\$1 50

1 75

3 00

d has

at the

seful-

being

very

large

small,

price

wise.

BRS.

J. V. Z.  
JOS. W.  
J. ADA  
E. ING  
DULAS  
R. L. L.  
ROSES  
EDWIN  
JOK. P.  
EDWA  
CHAR  
F. L. V.  
E. FLE  
C. T. I.  
L. W.

The  
day, S  
FET  
\$5.00  
Dai  
urday  
city a  
Hoo  
For  
lege, a

CE

EDU

Th  
menc  
matte  
direc  
To  
ordin  
port  
Colle  
pract  
of th  
socie  
any  
doms  
Te

# RUSH MEDICAL COLLEGE.

## FACULTY.

J. V. Z. BLANEY, A.M., M.D., Prof. of Chemistry and Pharmacy.  
JOE W. FREER, M.D., Prof. of Physiology and Microscopic Anatomy.  
J. ADAMS ALLEN, M.D., LL.D., Prof. of Principles and Practice of Medicine.  
E. INGALS, M.D., Prof. of Materia Medica and Medical Jurisprudence.  
DELAASKIE MILLER, M.D., Prof. of Obstetrics and Diseases of Women and Children.  
E. L. REA, M.D., Prof. of Anatomy.  
MORIS GUNN, A.M., M.D., Prof. of Principles and Practice of Surgery and Clinical Surgery.  
EDWIN POWELL, M.D., Prof. of Military Surgery and Surgical Anatomy.  
JOE P. ROSS, M.D., Prof. of Clinical Medicine and Diseases of the Chest.  
EDWARD L. HOLMES, M.D., Prof. of Diseases of the Eye and Ear.  
CHARLES T. PARKES, M.D., Demonstrator.  
F. L. WADSWORTH, M.D., Assistant to Prof. of Physiology.  
E. FLETCHER INGALS, M.D., Assistant to Professor of Materia Medica.  
C. T. FENN, M.D., Assistant to Professor of Obstetrics.  
L. W. CASE, M.D., Assistant to Professor of Chemistry.

The Twenty-eighth Annual Course of Lectures will commence on Wednesday, Sept. 27th, 1871, and continue twenty weeks.

FEES.—Lectures, \$55.00; Matriculation, \$5.00; Dissection, \$5.00; Hospital, \$5.00; Graduation, \$25.00.

Daily Clinics at the Dispensary, (except Sundays.) Surgical Clinics on Saturday afternoons, throughout the year, at which patients from the country and city are treated gratuitously.

Hospital Clinics are abundant and varied.

For Annual Announcement, or any information with reference to the College, address the Secretary.

**DR. DeLASKIE MILLER,**

518 Wabash Avenue, CHICAGO.

THE

## CHICAGO MEDICAL EXAMINER.

**N. S. DAVIS, M.D., EDITOR,**

**F. H. DAVIS, M.D., Assist.-Editor.**

### A MONTHLY JOURNAL

DEVOTED TO THE

EDUCATIONAL, SCIENTIFIC, AND PRACTICAL INTERESTS OF THE  
**MEDICAL PROFESSION.**

The EXAMINER will be issued during the first week of each month, commencing with January, 1860. Each number will contain 64 pages of reading matter, the greater part of which will be filled with such contents as will directly aid the practitioner in the daily practical duties of his profession.

To secure this object fully, we shall give, in each number, in addition to ordinary original articles, and selections on practical subjects, a faithful report of many of the more interesting cases presented at the Hospitals and College Cliniques. While aiming, however, to make the EXAMINER eminently practical, we shall not neglect either scientific, social, or educational interests, of the profession. It will not be the special organ of any one institution, society, or clique; but its columns will be open for well-written articles from any respectable member of the profession, on all topics legitimately within the domain of medical literature, science, and education.

Terms, \$3.00 per annum, invariably in advance.

**BLISS & SHARP,**  
Wholesale & Retail  
**DRUGGISTS AND CHEMISTS,**

NO. 105 STATE STREET, CHICAGO,

Keep constantly on hand a large assortment of

**PURE DRUGS, FINE CHEMICALS.**

Agents for the sale of

**TIEMANN'S CELEBRATED SURGICAL INSTRUMENTS**

**Codman & Shurtleff's Atomizing Apparatus,**

**BURROUGHS FLUID EXTRACTS,**

**Bullock & Crenshaw's Sugar Coated Pills,**

**CRUTCHES, ELASTIC STOCKINGS, BANDAGES, &c.**

Particular Attention Paid to Physicians' Orders.

**Gale & Blocki,**

(SUCCESSORS TO GALE BROTHERS.)

**DRUGGISTS**

**202 RANDOLPH STREET, CHICAGO, ILL.**

Are Wholesale and Retail Agents for the Sale of

**DR. RIDGE'S FOOD FOR INFANTS AND INVALIDS,**  
**CHAS. ELLIS SON & CO.'S SUGAR-COATED PILLS,**

**B. Keith & Co.'s Concentrated Medicines,**

**F. PATUREL'S SWEDISH LEECHES,**

Also Dealers in Every Variety of Medical Merchandise.

**FRESH VACCINE VIRUS.**

**ELECTRO-MAGNETIC MACHINES,**  
**GALVANIC BATTERIES.**

**French Artificial Eyes a Specialty.**

Prompt Attention Paid to Physicians' Orders, which will always be filled with the  
Best of Goods, at the Lowest Prices.

ORDERS FROM ABROAD respectfully solicited, and will meet with prompt attention.